Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

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

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

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

Α	For the	2023 cal	endar year, or tax year	beginning	7/1/2023	, and e	nding	6/	/30/202 <mark>4</mark>			
В	Check if a	applicable:	C Name of organization	Youth Collabo	rative Inc.			D Employ	er identifi	cation numb	er	
Χ	Address o	change	Doing business as									
\equiv		-	Number and street (or P.	O. box if mail is not	delivered to street addre	ss) Room/suite		85-10600	53			
Ш	Name cha	ange	1365 Westgate Cente	r Dr		JR		E Telepho	ne numbe	r		
	Initial retu	ırn	City or town		State	ZIP code		(226) 257	2746			
Ħ	- :	, , , ,	Winston Salem		NC	27103		(336) 257	-3740			
Щ	Final return	/terminated	Foreign country name	Foreign	province/state/county	Foreign postal	code					
	Amended	l return						G Gross re	eceipts \$		3	43,947
Ħ			F Name and address of pri	noinal officer:						. , , г	٦, , ,	
Ш	Applicatio	n pending	·	•				his a group retur		_		X No
			Andrea Vasquez 1365	Westgate Ce	nter Dr Site Jr, Wins	ston Salem, NC 2	H(b) Are	e all subordin	ates includ	ed?	Yes	No
1	Tax-exer	npt status:	X 501(c)(3) 501(c) ((insert no.) 4947	7(a)(1) or 527	lf'	'No," attach a	list. See ir	nstructions		
_	Website	· http	://https//www.ycinc.org	1/	<u> </u>	<u> </u>	H(c) Gr	oup exemptio	n number			
K	Form of o	organization	: X Corporation	Trust Associa	ation Other	L Yea	ar of form	ation: 202	0 M S	tate of legal o	iomicile:	NC
P	art I	Sui	mmary									
	1	Briefly d	escribe the organization	n's mission or	most significant act	ivities: To w	ork with	h youth in	the comi	munity by		
ခ်		providin	g them with tools and r	esources to er	sure their future su							
Jan			¥				77					
Activities & Governance	2	Check th	aia bay if the o	rappization dia	continued its operat	tions or disposed	of mor	o than 250	of ito n	ot agasta		
8	2	-		-						et assets.		
<u>ن</u> مح	3		of voting members of						3			
S	4		of independent voting						4			<u>4</u>
Ę	5		mber of individuals em			t V, line 2a)			5			5
妄	6		mber of volunteers (es						6			4
ĕ	7a		related business rever						7a			0
	b	Net unre	elated business taxable	e income from l	Form 990-T, Part I,	line 11			7b			
						•		Prior Year		Curr	ent Year	<u>r</u>
Φ	8	Contribu	itions and grants (Part	VIII, line 1h).				2	38,927		3	43,762
ū	9	Program	service revenue (Parl	VIII, line 2g).	. . ()				0			0
Revenue	10		ent income (Part VIII, d						0			0
ď	11		venue (Part VIII, colun						1,024			185
	12		enue—add lines 8 throu					2	39,951		3	43,947
	13		and similar amounts pa						0			0
	14		paid to or for member						0			
	15		other compensation, en					1	73,650			81,822
Ses								<u>'</u>	7 3,030			
Expenses	16a		onal fundraising fees (U			0
ᆢ	b		ndraising expenses (Pa			0			70 70 4			07.400
ш	17		penses (Part IX, colur						70,724			07,169
	18		penses. Add lines 13–		•	•		2	44,374			88,991
	19	Revenue	e less expenses. Subtr	act line 18 fron	<u> 1 line 12</u>				-4,423			<u>54,956</u>
Net Assets or							Beginn	ning of Curre	nt Year	End	of Year	
set	20		sets (Part X, line 16) .						75,496		1	02,749
t As	21	Total lia	bilities (Part X, line 26)						45,669			17,966
ş	22	Net asse	ets or fund balances. S	Subtract line 21	from line 20				29,827			84,783
Pa	art II	Sig	nature Block									
			, I declare that I have examin	ned this return, incli	iding accompanying sche	edules and statements	, and to th	ne best of my	knowledge	9		
and	belief, it is	s true, corre	ct, and complete. Declaration	of preparer (other	than officer) is based on	all information of which	n prepare	r has any kno	wledge.			
c:		_	046	_				02/	20/25			
Sig	_	Signa	on Borders (Feb 20, 2025 15:15 EST) ature of officer					Date				
He	re	Alvi	n Borders			Secr	etarv					
			or print name and title				J 101. J					
			/Type preparer's name		Preparer's signature		Dat	e		PTIN	<u> </u>	
Pa	id	' ''''	, po p. oparoi o namo		opa. or o orginaturo				Check	if ' '''	•	
		Britt	any Emery		Brittany (mery		02	/20/25	self-empl	oyed P02	11949	6
	eparer	Ī	's name Outfitters4	. Inc.				Firm's EIN	33-10	37531		
US	e Only	<i>'</i>			nston Salem, NC 27	7106		Phone no.		929-9499		
N 4 -	V 46 - 17							1 HOHE HU.	(000)			—
ıvla	y ine ik	suscus ex	s this return with the p	reparer snown	apove? See instruc	:UONS				. X	Yes	No

orm 9	90 (2023)	Youth Collaborative Inc.		85-1060053	Page 2
Pa	rt III	Statement of Program Service Check if Schedule O contains a	Accomplishments response or note to any line in this F	Part III...........	
1	To work	ura auganaa	ng them with tools and resources to ensu	re	
2	the prior	organization undertake any significant p r Form 990 or 990-EZ?		ere not listed on	X No
3	services	organization cease conducting, or make 6?		iny program	X No
4	Describe expense	e the organization's program service acc	complishments for each of its three larges nizations are required to report the amou		
4a	involven			0) (Revenue \$ of gang	
4b	(Code:) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)

Other program services (Describe on Schedule O.)

(Expenses \$

4e

Total program service expenses

0 including grants of \$ 277,355

0)(Revenue \$

0)

Form	990 (2023)	Youth Collaborative Inc.	85-106005	53	Р	age 3
Part	IV	Checklist of Required Schedules				
			Г		Yes	No
1		rganization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> the Schedule A		1	Х	
2		rganization required to complete Schedule B, Schedule of Contributors? See instructions		2	X	
3	Did the	organization engage in direct or indirect political campaign activities on behalf of or in opposition to tes for public office? If "Yes," complete Schedule C, Part I.		3		Х
4		501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		4		Х
5		rganization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, ments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		5		Х
6	have th	organization maintain any donor advised funds or any similar funds or accounts for which donors are right to provide advice on the distribution or investment of amounts in such funds or accounts? If accomplete Schedule D, Part I		6		X
7		organization receive or hold a conservation easement, including easements to preserve open space, ronment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	[7		Х
8		organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> the Schedule D, Part III	[8		Х
9	custodia negotia	organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a an for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debtion services? <i>If</i> "Yes," complete Schedule D, Part IV	t 	9		Х
10		organization, directly or through a related organization, hold assets in donor-restricted endowments asi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		10		Х
11	VII, VIII	ganization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, IX, or X, as applicable.				
а		organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete le D, Part VI.</i>		11a	Х	
b	of its to	organization report an amount for investments—other securities in Part X, line 12, that is 5% or more all assets reported in Part X, line 16? <i>If</i> "Yes," complete Schedule D, Part VII		11b		Х
С	of its to	organization report an amount for investments—program related in Part X, line 13, that is 5% or more ral assets reported in Part X, line 16? <i>If</i> "Yes," complete Schedule D, Part VIII		11c		Х
d	reported	organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets d in Part X, line 16? If "Yes," complete Schedule D, Part IX		11d		Х
e f	Did the	organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part</i> organization's separate or consolidated financial statements for the tax year include a footnote that addresses	X	11e	Х	
	•	nization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	-	11f	Χ	L
	Schedu	organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete D, Parts XI and XII</i>	<u>.</u>	12a		х
b	and if th	e organization included in consolidated, independent audited financial statements for the tax year? If "Yeare organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		12b		Х
13		rganization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		13		X
14a b		organization maintain an office, employees, or agents outside of the United States? organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	· · ·	14a		Х
J		sing, business, investment, and program service activities outside the United States, or aggregate				
15	foreign	investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		14b		Х
15	for any	foreign organization? If "Yes," complete Schedule F, Parts II and IV		15		Х
16	assistar	organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other nee to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		16		Х
17	on Part	organization report a total of more than \$15,000 of expenses for professional fundraising services IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		17		Х
18	Part VII	organization report more than \$15,000 total of fundraising event gross income and contributions on I, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		18		Х
19	If "Yes,	organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? "complete Schedule G, Part III		19		Х
20a		organization operate one or more hospital facilities? If "Yes," complete Schedule H		20a		Х
b		to line 20a, did the organization attach a copy of its audited financial statements to this return?	· · · <u> </u> 2	20b		
21		organization report more than \$5,000 of grants or other assistance to any domestic organization or ic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<u></u> .	21		Х

Par	Checklist of Required Schedules (continued)			г
22			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
	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	0.4-		
A	to defease any tax-exempt bonds?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
	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		Χ
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		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	21		Ĥ
	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		Χ
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 noncash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		_
31	conservation contributions? <i>If "Yes," complete Schedule M</i>	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"	31		_^
02	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		Χ
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
20	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? <i>If "Yes," complete Schedule R, Part V, line</i> 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		
•	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	Χ	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	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 on 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	1

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Part	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
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,			V
L	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	4a		Х
b	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		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	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		Χ
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	required to file Form 8282?	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	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		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		Х
u	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
_	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities	47		1
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

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

Section A. Governing Body and Management

Yes No 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. Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Χ at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Χ Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Χ 13 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a 15b Χ If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in contribute assets to, or participate in a joint venture or similar arrangement 16a Χ 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 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 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. Other (explain on Schedule O) Own website X Another's website X Upon request 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. State the name, address, and telephone number of the person who possesses the organization's books and records Outfitters4, Inc 717 Coliseum Dr NW, Winston Salem, NC 27106

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

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.

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

Check this box if neither the organization nor any	y related organiz	ation	con	npe	nsat	ed ar	ту с	urrent officer, di	ector, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	Pos neck ss pe	rson lire <i>a</i> ti	than o is both br/truste Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Terra Lataille	40.00									
Program Director	0.00			Χ				45,074		5,326
(2) Mary Cowan	2.00									
President	0.00			Х						
(3) Carla Brown	1.00									
Vice President	0.00			Х						
(4) Andrea Vasquez	1.00	1								
Secretary	0.00	Χ		Х						
(5) Tyeson Douglas	1.00									
Board Member	0.00	Χ								
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

85-1060053

Pa	Irt VI Section A. Officers, Directors, Tru	ıstees, Key Em	ploye	es,	and	iH k	ghes	t Co	ompensated Em	nployees (contin	ued)	
	(A) Name and title	(B) Average hours	Position (do not check more than or box, unless person is both officer and a director/truste						(D) Reportable compensation	(E) Reportable compensation	0	(F) ated amount f 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	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	fro organ	pensation om the ization and organizations
(15)							0.					
(16)												
(17)										*		
(18)												
(19)												
(20)									0			
(21)				~								
(22)			/									
(23)			V									
(24)												
(25)												
1b c d	Subtotal	ection A					 		45,074 0 45,074	0 0		5,326 (5,326
2	Total number of individuals (including but not lir reportable compensation from the organization	mited to those lis						ved),000 of		(
3	Did the organization list any former officer, dire employee on line 1a? <i>If "Yes," complete Sched</i>										3	Yes No
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual	ter than \$150,00	00? <i>If</i>	"Υε	es,"	con	plete	Sc	hedule J for suc	h	4	X
5	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye		n fror	n ar	ıy u	nrel	ated	org	anization or indiv			
Soci	tion B. Independent Contractors	es, complete st	neau	iie J	101	Suc	n pei	301	<u> </u>		5	X
1	Complete this table for your five highest compe compensation from the organization. Report co										27 765	ar
	(A) Name and business addr		110 00	1011	<u>uui</u>	you	1 0110	liig	(B) Description of ser		(C)	
									•			(
												(
		-										(
												(
2	Total number of independent contractors (include	-	ed to	tho	se l	iste	d abo	ve)	who received			(
	more than \$100,000 of compensation from the	organization					0					

Page **9**

Part VIII Statement of Revenue

-		Check if Schedule O contains a respons	se or	note to any line in	this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
· · ·	1a	Federated campaigns	1a	0				
ant	b	Membership dues	1b	0				
ည် ဋ	С	Fundraising events	1c	1,846				
ffs.	d	Related organizations	1d	0				
<u>a</u>	е	Government grants (contributions)	1e	277,278			A	
ns,	f	All other contributions, gifts, grants, and						
er (s		similar amounts not included above	1f	64,638		4		
들	g	Noncash contributions included in						
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a–1f	1g	\$ 4,990				
S E	h	Total. Add lines 1a–1f			343,762			
				Business Code				
<u>8</u>	2a				0			
Program Service Revenue	b				0			
gram Serv Revenue	С				0			
am ev	d				0			
Pg.	е				0			
<u> </u>	f	All other program service revenue			0			
	g	Total. Add lines 2a–2f			0			
	3	Investment income (including dividends, in						
		other similar amounts)		0				
	4	Income from investment of tax-exempt bon	•		0			
	5	Royalties		(ii) Personal	0			
	6a	Gross rents 6a	••	(ii) i Greend	*			
	b	Less: rental expenses 6b						
	C	Rental income or (loss) 6c	0	0				
	d	Not rental income or (less)			0			
	7a	Gross amount from (i) Securi	_	(ii) Other				
		sales of assets						
		other than inventory 7a	0	0				
ne	b	Less: cost or other basis						
Revenue		and sales expenses 7b	0	0				
è	С	Gain or (loss) 7c	0	0				
_	d	Net gain or (loss)			0			
Othe	8a	Gross income from fundraising						
O		events (not including \$						
		of contributions reported on line 1c).						
		See Part IV, line 18	8a	0				
		Less: direct expenses	8b	J U	0			
	C	Gross income from gaming activities.	is.		U			
	Эа	See Part IV, line 19	9a	0				
	b	Less: direct expenses	9b	0				
	-	Net income or (loss) from gaming activities			0			
		Gross sales of inventory, less			- C			
		3.	10a	0				
	b	Less: cost of goods sold	10b					
	C	Net income or (loss) from sales of inventor			0			
<u>s</u>		, , , , , , , , , , , , , , , , , , , ,		Business Code				
e e	11a	Misc Revenue		900099	185			185
ellaneo evenue	b				0			
Miscellaneous Revenue	С				0			
isc R	d	All other revenue			0			
≥		Total. Add lines 11a–11d			185			
	12	Total revenue. See instructions			343.947	0	0	185

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Form 990 (2023)

Youth Collaborative Inc.

Part IX	Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all c	columns. All other o	rganizations must c	omplete column (A)		
	Check if Schedule O contains a response or note t	to any line in this Pa	art IX		Г	
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	<u></u> -
1	Grants and other assistance to domestic organizations					
	and domestic governments. See Part IV, line 21	0				
2	Grants and other assistance to domestic					
	individuals. See Part IV, line 22	0				
3	Grants and other assistance to foreign					
	organizations, foreign governments, and foreign					
	individuals. See Part IV, lines 15 and 16	0				
4	Benefits paid to or for members	0				
5	Compensation of current officers, directors,					
	trustees, and key employees	51,204	51,204	0		
6	Compensation not included above to disqualified					
	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)	0				
7	Other salaries and wages	110,918	110,918			
8	Pension plan accruals and contributions (include					
	section 401(k) and 403(b) employer contributions)	4,280	4,280			
9	Other employee benefits	2,022	2,022			
10	Payroll taxes	13,398	13,398			
11	Fees for services (nonemployees):	*				
а	Management	0				
b	Legal	0				
С	Accounting	16,238	16,238			
d	Lobbying	0				
е	Professional fundraising services. See Part IV, line 17	0				
f	Investment management fees	0				
g	Other. (If line 11g amount exceeds 10% of line 25, column					
	(A), amount, list line 11g expenses on Schedule O.)	0		0		
12	Advertising and promotion	4,733	4,733			
13	Office expenses	19,536	19,490	46		
14	Information technology	0				
15	Royalties	0				
16	Occupancy	10,780	10,780			
17	Travel	0				
18	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings	0				
20	Interest	832		832		
21	Payments to affiliates	0				
22	Depreciation, depletion, and amortization	10,758	0	10,758		0
23	Insurance	8,231	8,231			
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.)	4.000	4.000			
а	In-Kind (Goods)	4,990	4,990			
b	Staff Training	4,287	4,287			
C	Vehicle Expenses	3,857	3,857			
d	Repairs and Maintenance	410	410			
е	All other expenses	22,517	22,517			
25	Total functional expenses. Add lines 1 through 24e	288,991	277,355	11,636		0
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					

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Part X	Balance	Sheet
--------	---------	-------

Pledges and grants receivable, net			Check if Schedule O contains a response or note to any line in this Par	t X		
Cash—non-interest-bearing				(A)		(B)
Pledges and grants receivable, net. 2,3601 3 45,887				Beginning of year		End of year
3 Pledges and grants receivable, net. 23,601 3 45,887		1	Cash—non-interest-bearing	. 2,086	1	17,361
A Accounts receivable, net		2			2	0
Secured Part Comment		3	Pledges and grants receivable, net	23,601	3	45,887
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 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) 7 Notes and loans receivable, net. 9 Prepaid expenses and deferred charges. 10a Lond, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1 Less: accumulated depreciation. 1 Investments—publicly traded securities. 1 Investmen		4	Accounts receivable, net	1,926	4	2,376
Controlled entity or family member of any of these persons (as defined under section 4950(f)(1)), and persons described in section 4950(e)(3)(B) Control of the section 4950(f)(1)), and persons described in section 4950(e)(3)(B) Control of the section 4950(e)(4) Contro		5	Loans and other receivables from any current or former officer, director,			
Comparison of the receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			trustee, key employee, creator or founder, substantial contributor, or 35%			
under section 4958(f)(1)), and persons described in section 4958(c)(3)(8) 7 Notes and loans receivable, net. 8 Inventories for sale or use. 9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 11 Investments—buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 12 Investments—other securities. See Part IV, line 11. 13 Investments—other securities. See Part IV, line 11. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 33). 17 Accounts payable and accrued expenses. 19 Deferred revenue. 19 Deferred revenue. 10 19 10 Deferred revenue. 10 Deferred r			controlled entity or family member of any of these persons	0	5	
7 Notes and loans receivable, net. 0 7 0 0 8		6	Loans and other receivables from other disqualified persons (as defined			
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	ets	7	Notes and loans receivable, net	0	7	0
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	SS	8	Inventories for sale or use	. 0	8	
Other basis. Complete Part VI of Schedule D 10a 53.791 10b 16.666 47.883 10c 37,125 11 Investments—bublicly traded securities 0 11 0 0 12 0 0 12 12	∢	9	Prepaid expenses and deferred charges	. 0	9	
B		10a	Land, buildings, and equipment: cost or			
11 Investments—publicly traded securities 0 11 0 0 12 0 0 13 0 0 14 13 10 14 11 15 10 15 16 15 16 16 16 17 16 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 17			other basis. Complete Part VI of Schedule D 10a 53,7	'91		
12 Investments—other securities. See Part IV, line 11. 0 12 0 0 13 10 14 11 10 13 10 14 11 10 13 10 14 11 10 15 15 10 15 15 10 15 16 16 16 16 16 17 17 18 17 18 18 18 19 18 18 19 19		b	Less: accumulated depreciation 10b 16,6	47,883	10c	37,125
13 Investments—program-related. See Part IV, line 11		11	Investments—publicly traded securities	0	11	0
14		12	Investments—other securities. See Part IV, line 11	. 0	12	0
15 Other assets. See Part IV, line 11		13	Investments—program-related. See Part IV, line 11	. 0	13	0
15 Other assets. See Part IV, line 11		14	Intangible assets	0	14	0
16 Total assets. Add lines 1 through 15 (must equal line 33) 75,496 16 102,749 17 Accounts payable and accrued expenses 5,043 17 7,966 18 Grants payable 0 18 19 Deferred revenue 0 19 20 Tax-exempt bond liabilities 0 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 0 22 23 Secured mortgages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 40,626 25 10,000 26 Total liabilities. Add lines 17 through 25 45,669 26 17,966 27 Net assets with odnor restrictions 29,827 27 84,783 28 Net assets with donor restrictions 29,827 27 84,783 29 Capital stock or trust principal, or current funds 0 29 30 Paid-in or capital surplus, or land, building, or equipment fund 0 30 31 Retained earnings, endowment, accumulated income, or other funds 29,827 32 84,783		15	Other assets. See Part IV, line 11	0	15	0
17		16	Total assets. Add lines 1 through 15 (must equal line 33)	75,496	16	102,749
19 Deferred revenue 0 19 20 20 21 21 22 22 23 24 24 24 25 25 26 25 26 26 25 26 27 28 28 27 29 27 29 29 29 29 29		17	Accounts payable and accrued expenses	5,043	17	7,966
Tax-exempt bond liabilities		18	Grants payable	. 0	18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 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. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 28 Net assets with donor restrictions. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 20 Paid-in or capital surplus, or land, building, or equipment fund. 30 Paid-in or capital surplus, or land, building, or equipment funds. 30 Total net assets or fund balances. 31 Total net assets or fund balances. 32 Secured mortgages and notes payable to unrelated third parties. 33 O 22 34 O 23 35 O 24 36 O 24 37 O 24 38 O 25 39 O 24 30 O 24 30 O 24 30 O 25 30 O 24 30 O 24 30 O 29 30 O 29 31 Retained earnings, endowment, accumulated income, or other funds. 30 O 31 31 Total net assets or fund balances.		19	Deferred revenue	. 0	19	
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. Secured mortgages and notes payable to unrelated third parties. O 23 0 0 23 0 0 24 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		20	Tax-exempt bond liabilities	0	20	
Unsecured notes and loans payable to the lated third parties		21	Escrow or custodial account liability. Complete Part IV of Schedule D	. 0	21	
Unsecured notes and loans payable to the lated third parties	es	22	Loans and other payables to any current or former officer, director,			
Unsecured notes and loans payable to the lated third parties	Ξ		trustee, key employee, creator or founder, substantial contributor, or 35%			
Unsecured notes and loans payable to the lated third parties	abi		controlled entity or family member of any of these persons	. 0	22	
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		23	Secured mortgages and notes payable to unrelated third parties	. 0	23	0
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties	. 0	24	0
Part X of Schedule D		25	Other liabilities (including federal income tax, payables to related third			
Total liabilities. Add lines 17 through 25						
Total liabilities. Add lines 17 through 25			Part X of Schedule D	. 40,626	25	10,000
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions		26	Total liabilities. Add lines 17 through 25	. 45,669	26	17,966
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions	S		Organizations that follow FASB ASC 958, check here X			
Net assets without donor restrictions 29,827 27 84,783 Net assets with donor restrictions 0 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 0 29 30 Paid-in or capital surplus, or land, building, or equipment fund 0 30 Retained earnings, endowment, accumulated income, or other funds 0 31 Total net assets or fund balances 29,827 32 84,783 Total liabilities and net assets/fund balances 75,496 33 102,749	ğ					
Net assets with donor restrictions	<u>a</u>	27	Net assets without donor restrictions	29,827	27	84,783
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds	ã					
and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds	ĭ					
Capital stock or trust principal, or current funds	ŕ		_			
Paid-in or capital surplus, or land, building, or equipment fund	ō	29		0	29	
31 Retained earnings, endowment, accumulated income, or other funds 0 31	ets					
32 Total net assets or fund balances 29,827 32 84,783 33 Total liabilities and net assets/fund balances 75,496 33 102,749	\ss					
Z 33 Total liabilities and net assets/fund balances 75,496 33 102,749	€ †					84,783
	ž					102,749

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Part	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)		343	3,947
2	Total expenses (must equal Part IX, column (A), line 25)		288	3,991
3	Revenue less expenses. Subtract line 2 from line 1		54	1,956
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		29	9,827
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))		84	1,783
Part				
	Check if Schedule O contains a response or note to any line in this Part XII			Х
			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?	2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both.			
	X Separate basis			
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 Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		Х

Form **990** (2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990 or Form 990-EZ.

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

Inspection

Employer identification number

Yout	h C	ollaborative Inc.					85-10	60053	
Par	t I	Reason for Public Char	ity Status. (All or	ganizations must co	mplete t	his part.)	See instructions.		
The	orga	anization is not a private foundat	•	•	-		•		
1		A church, convention of church	es, or association o	f churches described in	n section	170(b)(1)	(A)(i).		
2		A school described in section 1	1 70(b)(1)(A)(ii). (Atta	ach Schedule E (Form	990).)		•		
3		A hospital or a cooperative hos	pital service organiz	zation described in sec	tion 170(l	b)(1)(A)(ii	i).		
4		A medical research organizatio hospital's name, city, and state	· · ·	nction with a hospital d	lescribed	in section	170(b)(1)(A)(iii). Er	iter the	
5		An organization operated for th section 170(b)(1)(A)(iv). (Com	e benefit of a colleg	e or university owned	or operate	ed by a go	vernmental unit desc	cribed in	
6		A federal, state, or local govern	ment or governmen	ntal unit described in se	ection 170)(b)(1)(A)(v).		
7		An organization that normally redescribed in section 170(b)(1)(m a gove	rnmental u	unit or from the gene	ral public	;
8		A community trust described in		·	II.)				
9		An agricultural research organizer university or a non-land-gran	zation described in s	section 170(b)(1)(A)(ix) operated				je
		university:							
10	Х	An organization that normally receipts from activities related t support from gross investment acquired by the organization af	o its exempt function income and unrelated	ns, subject to certain e ed business taxable in	exceptions come (les	s; and (2) r s section (no more than 33 1/3° 511 tax) from busine	% of its	ss
11		An organization organized and	operated exclusivel	y to test for public safe	ety. See s e	ection 509)(a)(4).		
12		An organization organized and one or more publicly supported Check the box on lines 12a thro	organizations desc	ribed in section 509(a)(1) or se	ction 509(a)(2). See section 5	09(a)(3)	•
а		Type I. A supporting organiz the supported organization(s organization. You must con	s) the power to regunplete Part IV, Sect	larly appoint or elect a tions A and B.	majority o	of the direc	ctors or trustees of the	ne suppo	
b		Type II. A supporting organized control or management of the organization(s). You must control organization(s).	e supporting organi	zation vested in the sa					d
С		Type III functionally integrated its supported organization(s)	ated. A supporting o	organization operated i				rated wit	h,
d		Type III non-functionally in that is not functionally integr requirement (see instruction	tegrated. A supportated. The organizat	ting organization opera ion generally must sati	ated in cor sfy a distr	nnection w	rith its supported org quirement and an att		
е		Check this box if the organize functionally integrated, or Ty	ation received a wr	itten determination fror	n the IRS	that it is a		e III	
f		Enter the number of supported	organizations						0
g		Provide the following information			.				
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	other s	amount of upport (see ructions)
					Yes	No			
(A)					163	110			
		*							
(B)									
(C)									
(D)									
(E)									
Tota	l						0		0

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 Calendar year (or fiscal year beginning in) (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 **Total.** Add lines 1 through 3 0 0 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) Public support. Subtract line 5 from line 4 Section B. Total Support (e) 2023 (a) 2019 (b) 2020 (c) 2021 (d) 2022 Calendar year (or fiscal year beginning in) (f) Total 0 0 0 0 Amounts from line 4 0 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10... 12 12 Gross receipts from related activities, etc. (see instructions). 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 0.00% 14 15 16a 33 1/3% support test—2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test—2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 b 10%-facts-and-circumstances test—2022. 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

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

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

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

Sec	ction A. Public Support	amy ander the	iooto notou por	ovv, piedee cerr	pioto i dit ii.)		
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees	` ,	,	` '	` '	` '	
	received. (Do not include any "unusual grants.")		106,871	176,800	238,927	343,762	866,360
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					A	0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	106,871	176,800	238,927	343,762	866,360
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
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						0
_	Add lines 7a and 7b	0	• 0	0	0	0	0
8	Public support (Subtract line 7c from	0	0	, 0	U	U	0
Ü	line 6.)						866,360
Sec	ction B. Total Support		V				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	0	106,871	176,800	238,927	343,762	866,360
10a	Gross income from interest, dividends,	•					
	payments received on securities loans, rents,						
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less	4					
	section 511 taxes) from businesses						
	acquired after June 30, 1975		*				0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included on line 10b, whether						_
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets			200	4.004	405	4 445
12	(Explain in Part VI.)			206	1,024	185	1,415
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	106,871	177,006	239,951	343,947	867,775
14	First 5 years. If the Form 990 is for the orga	_				343,947	001,113
	organization, check this box and stop here			•			X
Sec	ction C. Computation of Public Su						<u> </u>
15	Public support percentage for 2023 (line 8, c		•	(f))		15	0.00%
16	Public support percentage from 2022 Sched	٠,٠	•	· //		16	0.00%
	ction D. Computation of Investmer						
17	Investment income percentage for 2023 (line			olumn (f))		17	0.00%
18	Investment income percentage from 2022 Se	chedule A, Part III,	line 17			18	0.00%
19a	33 1/3% support tests—2023. If the organi						-
	not more than 33 1/3%, check this box and s	-			-		
b	33 1/3% support tests—2022. If the organi						Γ
	line 18 is not more than 33 1/3%, check this	-	=				
20	Private foundation. If the organization did it	not check a box on	line 14, 19a, or 19	b, check this box a	nd see instructions	8	

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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 box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
L	3b		
	3c		
L	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
L	6		
L	7		
	8		
L	9a		
	9b		
L	9с		
	10a		
	10b		

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Part					
		-		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b a				
	11c below, the governing body of a supported organization?	 	11a		
b	A family member of a person described on line 11a above?	-	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, p		11c		
Sacti	detail in Part VI. on B. Type I Supporting Organizations		TIC		
00011	on B. Type i supporting organizations			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of o	ne or			110
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of				
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)				
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one s				
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amount				
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		1		
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Page 1	art			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,				
	supervised, or controlled the supporting organization.		2		
Secti	on C. Type II Supporting Organizations				1
		1		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director				
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or management of the supporting organization was vested in the same persons that controlled or manage	ea			
Socti	the supported organization(s).		1		
Secu	on D. All Type III Supporting Organizations			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	_ [162	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of				
	organization's governing documents in effect on the date of notification, to the extent not previously provide		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the support		Ė		
	organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part				
	the organization maintained a close and continuous working relationship with the supported organization(s		2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations has	•			
	a significant voice in the organization's investment policies and in directing the use of the organization's				
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
	supported organizations played in this regard.		3		
Secti	on E. Type III Functionally Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ar (see instruc	tion	s).	
а	The organization satisfied the Activities Test. Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	ntal entity (see in	struct	ions).	
2	Activities Test. Answer lines 2a and 2b below.	•	•	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes	of [103	140
-	the supported organization(s) to which the organization was responsive? <i>If</i> "Yes," <i>then in Part VI identify</i>				
	those supported organizations and explain how these activities directly furthered their exempt purpos				
	how the organization was responsive to those supported organizations, and how the organization determine				
	that these activities constituted substantially all of its activities.		2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement	ent,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain				
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged				
	these activities but for the organization's involvement.		2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.				
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or				
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	-	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this rega	ard.	3b		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	_		
1 Check here if the organization satisfied the Integral Part Test as a qualifying		• • • •	,
instructions. All other Type III non-functionally integrated supporting organi	zatio	ons must complete Sections	A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
•		(71) Their real	(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	0	0
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c.		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount	, ,		Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
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		0
7 Check here if the current year is the organization's first as a non-functionally	inte	egrated Type III supporting of	
instructions).		5 71 11 5	•

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Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 6 Other distributions (describe in Part VI). See instructions. 6 **7 Total annual distributions.** Add lines 1 through 6. 7 8 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. **9** Distributable amount for 2023 from Section C, line 6 9 0 **10** Line 8 amount divided by line 9 amount 10 0.000 (ii) (iii) Section E - Distribution Allocations (see instructions) Underdistributions Distributable **Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 0 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 **b** From 2019 0 0 **c** From 2020 **d** From 2021 0 e From 2022 **f** Total of lines 3a through 3e 0 **g** Applied to underdistributions of prior years 0 **h** Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) i Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 0 Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years 0 **b** Applied to 2023 distributable amount 0 c Remainder. Subtract lines 4a and 4b from line 4. 0 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 0 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2019. 0 0 **b** Excess from 2020. 0 c Excess from 2021. d Excess from 2022. 0

0

e Excess from 2023.

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Part VI	III, line 12; Part l	Information. Provide the explanations required by Part II, line 10; Part V, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, S	d 11c; Part IV, Section	
		V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and		
	lines 2, 5, and 6.	Also complete this part for any additional information. (See instruction	ns.)	
			13	
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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023Open to Public

Inspection

Name of the organization Employer identification number Youth Collaborative Inc. 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 1 Total number at end of year 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements Total acreage restricted by conservation easements . . . **c** Number of conservation easements on a certified historic structure included on line 2a . . . 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. **b** Assets included in Form 990, Part X.

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	III Organizations Maintaining C)
3	Using the organization's acquisition, ac	cession, and other rec	ords, check any	of the following tha	t make significant u	se of its	
_	collection items (check all that apply). Public exhibition		l Diagnar				
a		d		exchange program			
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization XIII.	n's collections and exp	olain how they fu	ırther the organizati	on's exempt purpos	e in Part	
5	During the year, did the organization so assets to be sold to raise funds rather t					Yes	No
Par	Complete if the organization a 990, Part X, line 21.		orm 990, Part	IV, line 9, or rep	orted an amount o	on Form	
1a	Is the organization an agent, trustee, concluded on Form 990, Part X?				ssets not	Yes _	No
b	If "Yes," explain the arrangement in Pa	rt XIII and complete the	e following table		Ar	nount	
С	Beginning balance			· · · . · · · · · · · ·	С		0
d	Additions during the year				d		
e	Distributions during the year				e		
f	Ending balance				f		0
2a	Did the organization include an amoun			· ·		Yes X	No
b	If "Yes," explain the arrangement in Pa	rt XIII. Check here if th	e explanation h	as been provided in	Part XIII	<u>L</u>	
Part							
	Complete if the organization a						
4-	Davinning of warm balance	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1a	Beginning of year balance Contributions	0					
b C	Net investment earnings, gains,						
C	and losses	. (
d	Grants or scholarships	***	,				
e	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance	0	0	0	0		0
2	Provide the estimated percentage of the		ance (line 1g, co	olumn (a)) held as:			
а	Board designated or quasi-endowment	%					
b	Permanent endowment	%					
С		<u>%</u>					
	The percentages on lines 2a, 2b, and 2				1.6 (1)		
3a	Are there endowment funds not in the	ossession of the orga	nization that are	held and administe	red for the	Vaa	T No
	organization by:					Yes	No
						3a(i) 3a(ii)	+
b	If "Yes" on line 3a(ii), are the related or					3b	+
4	Describe in Part XIII the intended uses		•			- JD	

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	0	0		0
b	Buildings	0	0	0	0
С	Leasehold improvements	0	0	0	0
d	Equipment	0	0	0	0
е	Other	0	53,791	16,666	37,125
Tota	II. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part X,	line 10c, column (B)).		37,125

Schedule D (Form 990) 2023 Youth Collaborative Inc. 85-1060053 Page **3**

Part VII	Investments—Other Securities.			
	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11b. See Form !	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year i	
(1) Financia	l derivatives	0		
	held equity interests	0		
(3) Other				
(A)				
(B)				
(C)			•	
(D)				
(E)				4
(F) (G)				
(H)				
	n (b) must equal Form 990, Part X, line 12, col. (B)) .	0		
Part VIII	Investments—Program Related.			
·	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11c. See Form 9	990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va	aluation:
			Cost or end-of-year i	market value
(1)				
(2)			()	
(3)				
(4) (5)				
(6)			*	
(7)			•	
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, line 13, col. (B)) .	0		
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) Descri	iption		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, line 15, o	col. (B))		C
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) Descrip	tion of liability		(b) Book value
_ , ,	I income taxes			C
	ele Line of Credit			10,000
(3) Van Pu	urchase			С
(4)				
(5)				
(6)				
(7)				
(8)				
	ımn (b) must equal Form 990, Part X, line 25, o	col. (B)) .		10,000
	, .,			, 10,000

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 R Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	eturn.	
4		1 4	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
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	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	0
	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	1 - 1	
rait		Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Other losses	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)	5	0
Part	XIII Supplemental Information.	I I	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa		
		rt V line 4: Part X I	ine
	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		ine
Part >			ine
	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform K Line 2 The Organization is exempt from federal and state income taxes on its		ine
	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		ine
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Schedule D (Fo		Youth Collaborative Inc.	85-1060053	Page 5
Part XIII	Supplem	ental Information (continued)		
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		,/\		
		. (/)		
		<u>:</u>		

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.

Attach to Form 990 or Form 990-EZ.

2023

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

Youth Collaborative Inc.	85-1060053
Form 990, Part XII, Line 2c: The committee that assumes responsibility for oversight of the	
review of its financial statements and selection of an independent accountant have not changed	
from the prior year.	
Form 990, Part VI, Line 11b: A copy of the return is provided to the Board of Directors for	
review prior to filing.	
Form 990, Part VI, Line 15a: The Executive Director's compensation is determined by the Board)
based on comparable market analysis.	
Form 990, Part VI, Line 19: Governing documents, conflict of interest policy and financial	
statements are available upon written request.	

Schedule O (Form 990) 2023	Page	2
Name of the organization	Employer identification number	
Youth Collaborative Inc.	85-1060053	
	,	

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning $\frac{7}{1}$, 2023, and ending $\frac{6}{30}$, 20 $\frac{24}{30}$

2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form8879TE for the latest information.

Name of filer	EIN or SSN					
Youth Collaborative Inc.	85-1060053					
Name and title of officer or person subject to tax						
Andrea Vasquez	Secretary					
Part I Type of Return and Return Information						
Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you centered form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you centered form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you centered form was be 545, 645, 745, 845, 945, or 1045 below, and the amount on that line for the return being filed with this form was be 545, 645, 745, 845, 945, or 1045 below, and the amount on that line for the return being filed with this form was be 545, 645, 745, 845, 945, or 1045 below. If you entered form was be 545, 645, 745, 845, 945, or 1045 below. If you entered form was be 545, 645, 745, 845, 945, or 1045 below. If you entered form was be 545, 645, 745, 845, 945, 945, 945, 945, 945, 945, 945, 9	theck the box on line 1a, 2a, 3a, 4a, lank, then leave line 1b, 2b, 3b, 4b, return, then enter -0- on the a), line 12)					
	n subject to tax with respect to (name					
2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electron intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IR acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in prothe date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to in (direct debit) entry to the financial institution account indicated in the tax preparation software for payment return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the processing of the electronic payment of taxes to receive confidential information necessary to answer inquite payment. I have selected a personal identification number (PIN) as my signature for the electronic return electronic funds withdrawal.	nic return. I consent to allow my S and to receive from the IRS (a) an cessing the return or refund, and (c) itiate an electronic funds withdrawal of the federal taxes owed on this the U.S. Treasury Financial Agent at financial institutions involved in the iries and resolve issues related to					
PIN: check one box only						
X I authorize Outfitters4, Inc. to enter my PI ERO firm name	N as my signature Enter five numbers, but do not enter all zeros					
on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.						
Signature of officer or person subject to tax	Date 02/20/25					
Part III Certification and Authentication						
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	566580 ot enter all zeros					
certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized entry e-file Providers for Business Returns.	-File (MeF) Information for Authorized					
ERO's signature Brittany (mery Date	02/20/25					
ERO Must Retain This Form—See Instructions						

Do Not Submit This Form to the IRS Unless Requested To Do So