Form

Return of Organization Exempt From Income Tax

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

2022

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

A	For th	e 2022 calendar year, or tax year beginning $07/01/22$, and ending $06/30/2$	The second secon		
В	Check if a	applicable: C Name of organization	DE	mployer	r identification number
Ш	Address o	change ROCKY MOUNTAIN YOUTH CORPS			101000
	Name cha	ange Doing business as			404817
Ħ	Initial retu	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 1960			751-1420
	Final retu			-	,02 2220
	terminated		0.0	iross rec	eipts \$ 3,657,107
	Amended	return F Name and address of principal officer.	100	1055 160	
\Box	Application	pending BENJAMIN THOMAS	H(a) Is this a group ret	turn for s	ubordinates? Yes X No
		PO BOX 1960	H(b) Are all subordina	ites inclu	ded? Yes No
		RANCHOS DE TAOS NM 87557	If "No," attac	h a list.	See instructions
_	Tay ayan	npt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527			
	Website:	THE VOLUME CORPORATE	H(c) Group exemption	number	
_			ear of formation: 199.		M State of legal domicile: NM
	art I	Summary	ear of formation. 100		M State of legal domicile. 1414
	1 '	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O			
JCe		SEE SCREDULE O			
nar					
Governance					
ő		Check this box if the organization discontinued its operations or disposed of more than 25% of	its net assets.	. 1	6
∞ŏ		Number of voting members of the governing body (Part VI, line 1a)		3	6
Activities		Number of independent voting members of the governing body (Part VI, line 1b)		4	153
tivi		Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	
Ac		Total number of volunteers (estimate if necessary)		6	120
		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
-	bi	Net unrelated business taxable income from Form 990-T, Part I, line 11	Prior Year	7b	Current Year
	8 (Contributions and grants (Part VIII, line 1h)	2,119,4	140	2,582,964
ne	1000	Program conjice revenue /Port VIII line 2a)	1,091,8		1,056,265
Revenue			9,1		16,514
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3/-	-0,	1,364
			3,220,4	179	3,657,107
_		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,220,4	.,,	3,037,107
	100000	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			0
. 4		Benefits paid to or for members (Part IX, column (A), line 4)	2,140,4	142	2,451,012
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,140,4	172	2,431,012
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)			
Exp	47	Total fundraising expenses (Part IX, column (D), line 25) 166,447	936,3	60	940,528
		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,076,8		3,391,540
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	143,6		
~ X2	19	Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Y		265,567 End of Year
Net Assets or Fund Balances	20 1	Total assets (Part X, line 16)	2,570,0		3,187,512
Ass	21 7	Total Ephilitian (Part V. Epa 26)	590,0		941,894
25	22 1	Net assets or fund balances. Subtract line 21 from line 20	1,980,0		2,245,618
	art II	Signature Block			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	ts and to the best of m	ny knov	wledge and belief it is
		ect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has		,	
		Genjamin C. homas		05/15/	2024
Sig	n	Signature of officer		Date	
Her		BENJAMIN THOMAS EXECUTIVE	DIRECTOR		
	•	Type or print name and title	/		
		Print/Type preparer's name Preparer's signature	Date	Check	if PTIN
Paid		COLLEEN A. LINO , CPA COLLEEN A. LINO , CPA	05/15/24		
Prep	parer	Firm's name PULAKOS CPAS, PC	Firm's E		85-0219147
	Only	6753 ACADEMY RD NE	rims E	ON	00 0210171
		Firm's address ALBUQUERQUE, NM 87109	Dhana	20	505-338-1500
May	the IR:	S discuss this return with the preparer shown above? See instructions	Phone r	10.	
		The state of the s			X Yes No

F	Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	X
	1 Briefly describe the organization's mission: SEE SCHEDULE O	
	•	
2	2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	🗀
3	3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
	4a (Code:) (Expenses \$ 2,348,901 including grants of \$) (Revenue \$ CONSERVATION FIELD CREWS - RMYC'S CONSERVATION PROGRAMS OFFER TO SUPPORT TO YOUNG ADULTS THROUGH PROJECT COMPLETION. UTILIZING TO CONSERVATION CORPS MODEL FROM THE 1930'S, RMYC MOBILIZES YOUNG A CREW TO ADDRESS HIGH PRIORITY COMMUNITY PROJECTS WHILE PROVIDING WITH PERSONAL, PROFESSIONAL, AND PROJECT EXPERIENCE AND TRAINING	THE CIVILIAN ADULTS INTO G MEMBERS G.
	•	
	·	
	•	
	4b (Code:) (Expenses \$ 153,766 including grants of \$) (Revenue \$ PREVENTION SERVICES- RMYC IS PART OF A TAOS AREA INITIATIVE TO I PREVENT ALCOHOL AND DRUG ABUSE, AMONG THE GENERAL POPULATION OF COMMUNITY AND SURROUNDING INDIAN PUEBLOS.	THE
	· · · · · · · · · · · · · · · · · · ·	
	4c (Code:) (Expenses \$ 99,118 including grants of \$) (Revenue \$ CANINE LEADERSHIP - RMYC PROVIDES PAID WORK EXPERIENCES FOR YOUT 22 WHO HAVE BARRIERS TO EMPLOYMENT, SUCH AS DISABILITY OR HEALTH CONDITIONS, THEMSELVES WITHIN THE CANINE LEADERSHIP CREWS. THE (AND THEIR SERVICE DOGS THAT GET TRAINED WILL ALSO BE CAMP COUNST CAMP L.E.A.D., A LEADERSHIP, EMPOWERMENT, AND ABUSE PREVENTION ITAOS FOR YOUNGER CHILDREN WITH DISABILITIES.	TH AGED 15- H CREW MEMBERS ELORS AT
	•	
	•	
4	4d Other program services (Describe on Schedule O.)	
	(Expenses \$ 48,493 including grants of \$) (Revenue \$ 4e Total program service expenses 2,650,278)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
_	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	١.		
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_ ا		x
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Voc." complete Cabadyla D. Bart I.	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	 •		
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		
Ü	complete Schedule D. Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	۳		
J	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	delate accordination and in a Color of the C	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	_		
	ar in guari andaymento? If "Voa." complete Schodula D. Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			l
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			,,
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1.0		
00-	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
ექ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

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 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 24 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 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 27 Experimental did by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 28 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 29 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? 29 If "Yes," complete Schedule L, Part I 20 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%	Pa	art IV Checklist of Required Schedules (continued)			
Per IV., column (A), line 2º II "Yes," complete Schedule I. Parts I and III 20 Dd the organization answer "Yes" to Part IVI, Section A. Inter 3.4 or 5 shout compensation of the organization's current and former officers directors, business, key employees, and highest compensated employees? "Yes," "Yes," "complete Schedule J. " 23 X 24a Dd the organization have day of the year, year was secured after per secure of the compensation of the com				Yes	No
Per IV., column (A), line 2º II "Yes," complete Schedule I. Parts I and III 20 Dd the organization answer "Yes" to Part IVI, Section A. Inter 3.4 or 5 shout compensation of the organization's current and former officers directors, business, key employees, and highest compensated employees? "Yes," "Yes," "complete Schedule J. " 23 X 24a Dd the organization have day of the year, year was secured after per secure of the compensation of the com	22	Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on			
22 Dit the cognization aware 1 Afform Configuration Configuration from the organization from the properties of the complete Schedule 1. A part of the complete Schedule 2. A part of the complete Schedule 3. A part of the comple		Post IV. solvens (A) line 00 if "Voe." complete Chadula I. Posta I and III.	22		x
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23	23				
an employeers? If "Yes," complete Schedule J 424 Did the organization have a test exempt bord issue with an outstanding principal amount of more than 525 Did the organization invest any proceeds of law exempt bords beyond a temporary period exception? 526 Did the organization invest any proceeds of law exempt bords beyond a temporary period exception? 526 Did the organization invest any proceeds of law exempt bords beyond a temporary period exception? 527 Did the organization invest any proceeds of law exempt bords beyond a temporary period exception? 528 Section 50(16), 50ft(c/4), 440 50fc(c/3) organizations, but the organization during the year? 529 Section 50(16), 50ft(c/4), 440 50fc(c/3) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 529 Section 50(16), 50ft(c/4), 52 Part I 520 Did 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 organizations prior Forms 990 or 960-E2? 520 Did the organization propriat any amount on Part X, line 5 or 22, for receivables from or payables to any ourcent or former officer, direct, transaction, key employee, creator or forue-disc, statistical contribution or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 520 Did the organization provide a grant or other assestments on any quarter of name officer, director, trustee, key employee, creator or forue-disc, statistical contribution? If "Yes," complete Schedule L, Part IV 521 Did the organization for payable time, the statistical contribution or any organization accordinate, and party to a business transaction with one of the following parties (see the Schedule L, Part IV 522 Did the organization forum or other assistant accordinate or any organization statistical party individual described in line 2887 If "Yes," complete Schedule					
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 240 through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule L. Part I of Did the organization makes an excrew account of the than a refunding escrew at any time during the year? 24d Did the organization and as no to behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and the any to behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and the any to behalf of issuer for bonds outstanding at any time during the year? 25b School School (24), 36d (26), 48d School (26), 29d organizations. Did the organization engage in an excess benefit transaction with a discipalified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E2? 18 "Yes," complete Schedule L. Part II 25c Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officie, director, trustee, key employee, creator or former officie, director, trustee, and the second or any officient or payables to any creation or payables contained to a 35% contr		ampleyage 2 If "Vag" apmplate Schadula I	22		Y
s 510,0,0,0 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and compreted Schedule K. If "Nic." op is the 25s b Did the organization invest any proceeds of lax exempt bonds beyond a temporary period exception? c Did the organization invest any proceeds of lax exempt bonds beyond a temporary period exception? d Did the organization between the process of lax exempt bonds beyond a temporary period exception? 24d Did the organization area as an "on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization area as an "on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization area as an "on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization area as an "on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization area as an "on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization area as an "on behalf of issuer for bonds outstanding an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E2? If "Yes," complete Schedule L. Part I I 25b	240		23		
b Dd the organization meantain an escrew account other than a returnding secrew at any time during the year c Did the organization maintain an escrew account other than a returnding secrew at any time during the year do defease any tax-exampt bords? 246 Dd the organization and as an 7-no behalf of issuer for bords outstanding at any time during the year? 258 Section 50(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization any any accesses therefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 258 X transaction with a disqualified person during the year? If "Yes," organization any any accesses therefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior of complete Schedule L, Part I 259 X the organization provide a grant or other assistance on any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X The Schedule L, Part II 26 X Was 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 5%, controlled entity (including an employee thereof) a grant selection committee member, or to a 5%, controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV 28 X Was the organization receive contributions of any employee thereof or any substantial contributor? If "Yes," complete Schedule I, Part IV 28 X Did the organization receive contributions of any interestical part of the organization receive more former officer, director, trustee, key employee, creation	24a				
b Did the organization invest any proceeds of trave-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year d Did the organization and at as an "on behalf of issuer for bonds outstanding at any time during the year? 24c 24d 25s Section 50(16), 801(16)(4), and 501(16)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 25b Is the organization aware that lengaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 25c Id the organization aware that lengaged 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-E2? 35d If "Yes," complete Schedule I, Part I 26d Id 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 immember of any of these persons? If "Yes," complete Schedule I. Part II 27d Id the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule I, Part II II 28d Was the organization a party to a business transaction with one of the following parties (see the Schedule I. Part IV 28d IA Taminy member of any individual described in limit 28d or 28d if If "Yes," complete Schedule II. Part IV 28d IA Taminy member of any individual described in limit 28d or 28d if If "Yes," complete Schedule II. Part IV 28d IA Taminy member of any individual described in limit 28d or 28d if II "Yes," complete Schedule II. Part IV 28d IA Taminy member of any individual described in limit 28d or 28d if II "Yes," c			04-		v
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tix-exceptible bonds? d Did the organization and as an 'on behalf of Issuer for bonds outstanding at any time during the year? 256 Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes', complete Schedule L. Part / 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 profit and singuillified person in a prior year, and that the transaction has not been reported on any of the organization profit and the transaction has not been reported on any of the organization profit any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part II 26 X 27 Did the organization apport or substantial contributor or employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part II 28 X 28 Was the organization apply to a business transaction with one of the following parties (see the Schedule L. Part IV 128 X 28 Yes, "Complete Schedule L. Part IV 28 X 29 Did the organization receive the profit profit of the profit of					Λ
to delease any tax-exempt bonds? d) Diff the organization axes are in no bohalf of lissuer for bonds outstanding at any time during the year? 256 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 258 X 259 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction what is disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E2? 16 Yes, "complete Schedule I, Part I I 26 Ut the organization apport any amount on Part X, line 5 or 22, for receivables form or payables to any current or former officer, director, tustee, key employee, creation or former officer, director, fustee, key employee, creation	_		24b		
d Did the organization act as an 'no hobital of issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes, complete Scheduble I, Part I 25a	С				
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Dot the organization engage in an excess benefit transaction with a disqualified person during the year? If 1''es; complete Schedule L, Part I 25b X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations proper 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 contribution, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contribution or employee thereol, a grant selection committee member, or to a 35% controlled entity (including an employee thereol) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization apparty to a business transaction with one of the following parties (see the Schedule L, Part III 28b X X Yes," complete Schedule L, Part III 28b X X 28 A C A 35% controlled entity of one or more individuals sandor organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part II 28b X X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part II 28b X X 30 Did the organization includeta, terminate, or dissolve and coase operations? If "Yes," complete Schedule N, Part I 31 X X 31 Did the organization includeta, terminate, or dissolve and coase operations? If "Yes," complete Schedule N, Part II 31 X X 32 Did the organization receive contributions of art. historical treasures, or other similar assets, or qualified conservation or network or the organization related to any tar-severing for taxable entity? If "Yes," complete Sc					
transaction with a disqualited person during the year? If "Yes," complete Schedule L, Part I year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 year, and that the transaction has not been reported on any of the organization prior Forms 990 or 990-E27 year, and that the transaction has not been reported on any of the organization prior Forms 990 or 990-E27 year, and that the transaction has not been reported or or founder, substantial contributor, or 35% controlled entity of ramily member of any of these persons? If "Yes," complete Schedule L, Part II year, and the service of the prior of the assistance to any current or former officer, director, frustee, 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 farmly member of any of these employee, creator or founder, substantial contributor or employee thereof) or farmly member of any of these employee, or creator or founder, substantial contributor or employee thereof), a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or farmly member of any of these employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV 28a X X A Standard or former officer, director, frustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X X A Standard A	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? 1/262 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 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), 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 Legal III Le	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
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member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I., Part III. 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule I., Part IV, instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule I., Part IV 288 X b A family member of any individual described in line 28a? If "Yes," complete Schedule I., Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 280? II "Yes," complete Schedule I., Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization individual, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule O and provide explanations on schedule O for Part V, line 1 36 X 37 Did the organization complete Schedule O and provide explanations on schedule O for Part V, lines 11b and 197 Note: All Form 990 filers are required to complete Schedule O. Contains	27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
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Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV 288 X b A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L. Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N 30 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," and 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 II, III, or IV, and Part V, line 1 33 X 35a Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35b Lif "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, line 2 35b V If "Yes," complete Schedule R, Part V, lin	28				
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Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35a Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V II and 19? Note: All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. Part 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	00		_		
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c Did the organization comply with backup withholding rules for reportable payments to vendors and					
	Ü		10		

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continu	ied)			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	153			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Х	
3a				3a		X
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 auth	nority o	ver,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)1	?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the control of	,	,			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \dots			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					3,5
				6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or				
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	40				
а				7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			"		
·	required to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contr			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by					
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a		-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources	ا ا				
10-	against amounts due or received from them.)	11b		10-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	1 1		12a		
b 12		12b		-		
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.			1Ja		
b	Enter the amount of reserves the organization is required to maintain by the states in which					
-	· · · · · · · · · · · · · · · · · · ·	13b				
С		13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	-		14a		X
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					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment inc	ome?		16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Form 990 (2022) ROCKY MOUNTAIN YOUTH CORPS 85-0404817 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 6 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 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 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? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? X b 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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? 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. b Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? X 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b 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 with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed **NM** 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. X Own website X Another's website X Upon request Other (explain on Schedule O) 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

ROSANNA ARAGON 1203 KING DR, UNIT 3

NM 87571 505-228-1558

TAOS

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

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

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

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

				compensated			

<u> </u>										
(A) Name and title	(B) Average hours per week (list any	bo off	x, unle	Pos check ess pe	rson i	than o	an ee)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	y employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
(1) DOUG THIESEN										
	1.00									
DIRECTOR	0.00	X				_		0	0	0
(2) DEDE FELDMAN	1.00									
DIRECTOR	0.00	x						0	o	0
(3) NAOMI CONCHA	0.00	<u> </u>						· ·		
(0) -1.2.2.2.2	1.00									
DIRECTOR	0.00	X						0	0	0
(4) MARC SPACE										
	1.00									
TREASURER	0.00	X		X				0	0	0
(5) CAMERON MARTINEZ										
	1.00									
VICE-CHAIR	0.00	X		X				0	0	0
(6) ANJANETTE BRUSH	1 00									
	1.00	х		x				0	o	o
CHAIR (7) BENJAMIN THOMAS	0.00	A		Λ				0	U	<u> </u>
(7) BENUAMIN IHOMAS	45.00									
EXECUTIVE DIRECTOR	0.00			x				85,385	0	30,072
(8) ROSANNA ARAGON									Ţ.	33/31=
•	45.00									
FINANCE DIRECTOR	0.00			Х				85,939	0	10,413
(9) MATTHEW FOSTER-	DEVELOPM	ŒΝ	T	DI	RE	¢тс	R			
	40.00									
THROUGH FEB '23	0.00			X				63,155	0	12,974
(10) DAVID GALLEGOS-	ASSOCIAT	E	DI	RE	CT	ΦR				
	40.00							01.610	_	
AUG '22 - MAY '23	0.00	me	_	X				21,619	0	0
(11) MATTHEW SPRIGGS-	ASSOCIA 40.00	LE	ם ן	TK	ĽC	TOF				
THROUGH SEPT. '22	0.00			x				48,259	o	7,322
III.OOGII OHEI. ZZ	. 5.55	<u> </u>			I	<u> </u>		1 40,233	<u> </u>	Form 990 (2022)

DAA

Pa	rt VII Section A. Officers	, Directors, Trus	stee	s, Ke	ey E	mplo	yees	s, ar	nd Highest Compensated	Employees (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for	bo	ox, unl		rson i	s both or/trust	an ee)	(D) Reportable compensation from the organization (W-2/ 1099-MISC/	(E) Reportable compensation from related organizations (W-2/1099-MISC/	org	(F) imated an of other ompensati from the ganization	tion e and	
		related organizations below dotted line)	ral trustee stor	onal trustee		nployee	Highest compensated employee		1099-NEC)	1099-NEC)	relate	ed organi:	zations	
(12	2) ANDREA PEPIN-	1	ME	NT	D	IR	EC:							
FRO	OM MARCH '23	40.00			x				0	0)			0
1b c	Subtotal Total from continuation shee								304,357			6	0,78	31
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (increportable compensation from	cluding but not lim							304,357 who received more than \$1	00,000 of		6	0,78	31
3	Did the organization list any for	r mer officer, direc	ctor,	trust	ee, k	кеу с	emplo	oyee,	, or highest compensated		Г	-		No
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	1a, is the sum of izations greater the	f rep han	oortal \$150	ble c ,000	omp	ensa <i>'Yes,</i>	tion a	mplete Schedule J for such	m the		4		X X
5	individual	a receive or accri	ue c	ompe	ensat	ion f	rom	any	unrelated organization or inc			5		x
	ion B. Independent Contracto	rs												
1	Complete this table for your fiv compensation from the organiz	ation. Report con							year ending with or within t	the organization's tax year.				
	Name and	(A) I business address							Descript	(B) ion of services		Comp	(C) pensation	
2	Total number of independent c							nose	listed above) who		\dashv			
	received more than \$100,000 d								-	0				

Pa	irt v			r Revenue edule O conta	ains a	respon	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
ts	1a	Federated camp	aigns		1a						
aran oun	b	Membership due	es		1b						
S, G	С	Fundraising ever	nts		1c		3,450				
ar	d	Related organiza	ations		1d						
s, (е	Government grants (co	ontribution	ns)	1e	2,	013,831				
tion er S	l t	All other contributions, and similar amounts no			1f		565,683				
ŞĘ,	g	Noncash contributions	included	in			300,000				
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f						0 -00 001			
<u> </u>	h	Total. Add lines	1a–1f					2,582,964			
	2a	CONCEDIZATIO		PENG CEDITOR	~		Business Code 900099	1,039,890	1,039,890		
vice	za b	TRAINING F		EWS SERVICE			900099	16,375	16,375		
Program Service Revenue	C	*					300033	10,373	10,373		
an ever	d										
ogr R	e										
Œ		All other progran									
	g	Total. Add lines	2a-2f					1,056,265			
	3	Investment incom	ne (inc	luding dividends	, intere	st, and					
		other similar am	ounts)					8,029			8,029
	4	Income from inve	estmer	nt of tax-exempt	bond p	roceeds					
	5	Royalties									
				(i) Real		(ii)	Personal				
	6a	Gross rents	6a								
	b	Less: rental expenses	6b								
		Rental inc. or (loss)	6c								
		Net rental incom Gross amount from	e or (lo	(i) Securities			Other				
		sales of assets	7a	.,,	, 485	(II	Other				
ω	h	other than inventory Less: cost or other	1a		, 403						
Revenue	~	basis and sales exps.	7b								
3eVe	С	Gain or (loss)	7c	8	, 485						
	l	Net gain or (loss						8,485			8,485
Other	l .	Gross income from						·			
•		(not including \$		3,450							
		of contributions rep	orted o	n line							
		1c). See Part IV, lir			8a						
	b	Less: direct expe	enses		8b						
	l	Net income or (le		-	vents .						
	9a	Gross income from	_	-	١.						
	١.	activities. See Pa			9a						
		Less: direct expe			9b_						
	l	Net income or (le			ities						
	IUa	Gross sales of ir returns and allow			10a						
	h	Less: cost of goo			10a						
	l .	Net income or (le				<u> </u>					
					y		Business Code				
Miscellaneous Revenue	11a	OTHER INCO	ME				900099	1,364			1,364
ane	b										
eve eve	С										
Mis	d	All other revenue									
		Total. Add lines						1,364			
	12	Total revenue.	See in	structions				3,657,107	1,056,265	0	17,878

Part IX Statement of Functional Expenses

Form 990 (2022)

secti	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response		-	е соштт (А).	
Do n	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	363,652	286,486	55,947	21,219
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,594,906	1,256,470	245,374	93,062
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4,807 306,030	3,787	740	280
9	Other employee benefits		241,093	47,083	17,854
10	Payroll taxes	181,617	143,078	27,942	10,597
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	33,295	31,067	2,228	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	167,395	156,193	11,202	
12	Advertising and promotion	10,414	10,383	31	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	179,339	95,465	72,608	11,266
17	Travel	11,626	10,003	1,341	282
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	25 242	24 740	242	0.60
22	Depreciation, depletion, and amortization	35,348	34,742	343	263
23	Insurance	59,747	39,756	16,133	3,858
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.)	164 242	160 170	2 226	1 060
а	TRANSPORTATION	164,343	160,179	3,096	1,068
b	DUES AND SUBSCRIPTIONS	81,279	13,346	64,937	2,996
C	SUPPLIES AND MATERIALS	62,822	59,987	2,664	171
d	MAINTENANCE AND REPAIRS	40,728	39,828	900	0 501
е	All other expenses	94,192	68,415	22,246	3,531
25 26	Total functional expenses. Add lines 1 through 24e	3,391,540	2,650,278	574,815	166,447
20	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)	l l	1		

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form 990 (2022)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1,295,103 1,359,046 Cash—non-interest-bearing Savings and temporary cash investments 647,005 956,208 3 Pledges and grants receivable, net 3 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Assets Notes and loans receivable, net 7 17,015 22,066 Inventories for sale or use 11,563 14,198 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 915,433 10a b Less: accumulated depreciation 10b 328,869 596,371 586,564 10c Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 249,430 Other assets. See Part IV, line 11 3,000 15 15 2,570,057 3,187,512 16 Total assets. Add lines 1 through 15 (must equal line 33)..... 195,679 310,874 Accounts payable and accrued expenses 17 17 Grants payable 18 18 362,473 348,170 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 31,854 of Schedule D 282,850 590,006 941,894 **Total liabilities.** Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 1,613,833 1,844,890 27 366,218 400,728 28 Net assets with donor restrictions Net Assets or Fund Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 31

3,187,512 Form **990** (2022)

2,245,618

1,980,051

2,570,057

32

-0111	1990 (2022) ROCKI MOONIAIN 1001H CORPS 83-0404817			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,6	57,3	107
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,3	91,	540
3	Revenue less expenses. Subtract line 2 from line 1	3	2	65,	567
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,9	80,0	051
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	2,2	45,0	618
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash 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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	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	X	
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	X	

Form **990** (2022)

SCHEDULE A

(Form 990)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

Employer identification number ROCKY MOUNTAIN YOUTH CORPS 85-0404817 Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

1	Ш	A church, cor	nvention of churches, or asso	ciation of churches described in	section	170(b)(1)(A)(i).	
2	Ш	A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E (Form	990).)			
3	Ш	A hospital or	a cooperative hospital service	e organization described in sect	ion 170(b)(1)(A)(iii)		
4	Ш	A medical res	search organization operated	in conjunction with a hospital de	scribed in	section	170(b)(1)(A)(iii). Enter the hosp	ital's name,
	_	city, and state	e:					
5		An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmental unit described in	
	_	section 170	(b)(1)(A)(iv). (Complete Part	II.)				
6	Ш	A federal, sta	te, or local government or go	vernmental unit described in se	ction 170	(b)(1)(A)(v	/).	
7	X	-	on that normally receives a su section 170(b)(1)(A)(vi). (Co	ubstantial part of its support from emplete Part II.)	a govern	mental un	it or from the general public	
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part II	l.)			
9	П	An agricultura	al research organization desc	ribed in section 170(b)(1)(A)(ix) operated	l in conjur	action with a land-grant college	
				agriculture (see instructions). Er				
10		receipts from support from	activities related to its exemp gross investment income and	more than 33 1/3% of its support functions, subject to certain exit unrelated business taxable inco, 1975. See section 509(a)(2).	ceptions; a ome (less	and (2) no section 5°	more than 331/3% of its	
11	П		•	clusively to test for public safety	•	,	a)(4)	
12	Н	Ü	0 1	clusively for the benefit of, to pe			, , ,	of
12	Ш	•		ons described in section 509(a)(
				cribes the type of supporting orga		•		
Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the								
	supporting organization. You must complete Part IV, Sections A and B.							
	b			ervised or controlled in connection			• ,,, •	
			•	ng organization vested in the sal	me persor	ns that coi	ntrol or manage the supported	
			ion(s). You must complete I	•		:		
	С	its suppo	rted organization(s) (see inst	upporting organization operated i ructions). You must complete F	Part IV, Se	ections A	D, and E.	
	d	Type III	non-functionally integrated	. A supporting organization opera	ated in co	nnection v	vith its supported organization(s)
		that is no	t functionally integrated. The	organization generally must satis	sfy a distri	bution rec	uirement and an attentiveness	
		requireme	ent (see instructions). You m	ust complete Part IV, Sections	A and D	, and Par	t V.	
	е			ived a written determination from			Type I, Type II, Type III	
			nber of supported organizatio	-functionally integrated supportin	g organiza	ation.		
	f g		ollowing information about the					
			1		(i) ()		(a) Amount of monoton.	(rd) Amount of
(I		ne of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
		-		above (see instructions))	docu	ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(0)								
(D)								
(E)								
Tota		nuork Doduckie	n Act Notice, see the Instruction	one for Form 000 or 000 F7				 Schedule A (Form 990) 2022
or F	apel	work neduction	ii Act Notice, see the instruction	UIIS IUI FUIIII 330 UF 330-EZ.			;	Schedule A (FOIII 990) 2022

85-0404817

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				•	,		
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,627,847	1,573,709	2,992,937	2,119,440	2,582	, 964	10,896,897
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	1,627,847	1,573,709	2,992,937	2,119,440	2,582	, 964	10,896,897
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)							306,633
6_	Public support. Subtract line 5 from line 4							10,590,264
	tion B. Total Support	1 1						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202		(f) Total
7	Amounts from line 4	1,627,847	1,573,709	2,992,937	2,119,440	2,582	, 964	10,896,897
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	102	5,220	101	67	8	, 029	13,519
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	899	5,676			1	.,364	7,939
11	Total support. Add lines 7 through 10							10,918,355
12	Gross receipts from related activities, etc. ((see instructions)					12	6,186,871
13	First 5 years. If the Form 990 is for the org	ganization's first, sed	cond, third, fourth,	or fifth tax year as a	a section 501(c)(3)			
	organization, check this box and stop here							
Sec	tion C. Computation of Public Su							
14	Public support percentage for 2022 (line 6,	column (f) divided b	y line 11, column ((f))			14	97.00%
15	Public support percentage from 2021 Scheo	dule A, Part II, line	14				15	94.52 %
16a	33 1/3% support test—2022. If the organic				1/3% or more, ched	ck this		-
	box and stop here. The organization qualif							X
b	33 1/3% support test—2021. If the organic							
	this box and stop here. The organization q							L
17a	10%-facts-and-circumstances test—202							
	10% or more, and if the organization meets							
	Part VI how the organization meets the fac organization							
b	10%-facts-and-circumstances test—202	21. If the organizatio	n did not check a b	oox on line 13, 16a,	16b, or 17a, and li	ne		
	15 is 10% or more, and if the organization							
	in Part VI how the organization meets the f	facts-and-circumstar	ices test. The orga	nization qualifies as	s a publicly support	ted		
	organization							L
18	Private foundation. If the organization did							1
	instructions							L

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.)

aler	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
1	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
ес	tion B. Total Support						
aler	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
1	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11, and 12.)						
4	First 5 years. If the Form 990 is for the organization, check this box and stop here	ganization's first, se		-	. , . ,)	
ec	tion C. Computation of Public Su						
5	Public support percentage for 2022 (line 8,						%
3	Public support percentage from 2021 Scheo	dule A, Part III, line	15				9/
	tion D. Computation of Investme						
ec	Investment income percentage for 2022 (lin	ne 10c, column (f),	divided by line 13,	column (f))		17	9
ec 7	Investment income percentage for 2022 (lir		lino 17			18	9
ec 7 8	Investment income percentage from 2021 S						
	Investment income percentage from 2021 S 33 1/3% support tests—2022. If the organ	nization did not ched	ck the box on line 1	14, and line 15 is m	ore than 33 1/3%,	and line	Γ
Sec 7 8 9a	Investment income percentage from 2021 33 1/3% support tests—2022. If the organ 17 is not more than 33 1/3%, check this box	nization did not chec x and stop here. T	ck the box on line 1 he organization qu	14, and line 15 is m alifies as a publicly	ore than 33 1/3%, supported organiz	and line ation	
ec 7 8	Investment income percentage from 2021 S 33 1/3% support tests—2022. If the organ	nization did not check and stop here. T nization did not check	ck the box on line 1 he organization quack ck a box on line 14	14, and line 15 is m alifies as a publicly or line 19a, and lin	ore than 33 1/3%, supported organiz e 16 is more than	and line ation33 1/3%, and	Í

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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		
	_		
	20		
	3a		
	3b		
	3с		
	4a		
	A1.		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	0-		
	9a		
	9b		
	9с		
	10a		
	ıva		
	10b		990) 2022
Sche	edule A	A (Form 9	990) 2022

Par	t IV Supporting Organizations (continued)			<u></u>
			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 and			
	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,			
	provide detail in Part VI.	11c		
Secti	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 one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
04	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No_
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
Socti	the supported organization(s). on D. All Type III Supporting Organizations	1		
Secu	on B. All Type III Supporting Organizations		Vaa	N _a
	Did the executation provide to each of its supported executations, but the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
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 year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction	ns).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No_
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
_	have engaged in these activities but for the organization's involvement.	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			
L	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or no oupported diganizations: ii 165, desende ii i art vi the fole played by the diganization iii this fegalu.		I	

ROCKY MOUNTAIN YOUTH CORPS

Page 6

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations								
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See									
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.									
Secti	on A – Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)						
1_	Net short-term capital gain								
2	Recoveries of prior-year distributions	2							
3_	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or collection								
	of gross income or for management, conservation, or maintenance of								
	property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Sect	on B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
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							
е	Discount claimed for blockage or other factors								
	(explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3_	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,								
	see instructions).	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by 0.035.	6							
7	Recoveries of prior-year distributions	7							
8_	Minimum Asset Amount (add line 7 to line 6)	8							
Sect	on C – Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-functionally integrated Typ	e III si	upporting organization						
	(see instructions).								

Schedule A (Form 990) 2022

85-0404817

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Par	t V Type III Non-Functionally Integrated 509(a)(3) \$		ions (continued)	040	Page Page
	on D – Distributions	supporting organizati	ione (committee)		Current Year
	On D - Distributions		Current rear		
1_	Amounts paid to supported organizations to accomplish exempt purpose	es		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of	of supported			
	organizations, in excess of income from activity	2			
3_	Administrative expenses paid to accomplish exempt purposes of support	ted organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5_	Qualified set-aside amounts (prior IRS approval required—provide detail	ls 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	on is responsive		8	
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	•	Distributable
			Pre-2022		Amount for 2022
1_	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required-explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
	From 2017				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
c	Excess from 2020				
d	Excess from 2021				

Schedule A (Form 990) 2022

e Excess from 2022

ROCKY MOUNTAIN YOUTH CORPS Schedule A (Form 990) 2022 85-0404817 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) PART II, LINE 10 - OTHER INCOME DETAIL 7,939 OTHER INCOME

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection Name of the organization Employer identification number ROCKY MOUNTAIN YOUTH CORPS 85-0404817 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 Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 4 Aggregate value at end of year 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? 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 conferring impermissible private benefit? 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 Protection of natural habitat Preservation of a certified historic structure 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 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) 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 the 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 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. 1a 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. b 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: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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: a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X.

	art III Organizations Maintainin	g Collections of		reasures, or	Other Simil	ar Asset	s (conti	nued)
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records,	check any of the follo	wing that make si	gnificant use of	its			
а	Public exhibition	d 🗌	Loan or exchange pro	ogram					
b	Scholarly research	е 🗌	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain h	now they further the o	rganization's exem	npt purpose in I	Part			
	XIII.								
5	During the year, did the organization solicit		-	· ·					П
	assets to be sold to raise funds rather than		art of the organization's	s collection?				Yes	No
Pa	Complete if the organization 990, Part X, line 21.	•	on Form 990, Pa	art IV, line 9, c	or reported a	n amoun	ıt on For	m	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermedia	-					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII						···· 🗀		
			-				Amo	unt	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			_
	Did the organization include an amount on F							Yes	∐ No
	If "Yes," explain the arrangement in Part XIII	. Check here if the exp	planation has been pro	vided on Part XIII	<u> </u>		<u> </u>	<u></u>	
Pa	ert V Endowment Funds.	n anawarad "Vas"	on Form 000 De	ort IV line 10					
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two years b	I	nree years back	k (0) I	our yea	re back
10	Paginning of year balance	(a) Current year	(b) Filor year	(c) Two years t	Jack (u) II	iree years baci	(e) i	our yea	IS DACK
b	Beginning of year balance Contributions								
c									
Ŭ	losses								
d	Grants or scholarships								
	0.1								
	programs								
f									
g	End of year balance								
2	Provide the estimated percentage of the cur	•	(line 1g, column (a)) h	eld as:					
	• • • • • • • • • • • • • • • • • • • •								
b	Permanent endowment %								
С	Term endowment %								
0-	The percentages on lines 2a, 2b, and 2c sho	•		alastata i a al fa a di					
зa	Are there endowment funds not in the posse	ession of the organizati	on that are held and a	laministerea for th	ie			Ye	s No
	organization by: (i) Unrelated organizations						3a(5 110
	(i) Unrelated organizations (ii) Related organizations						· · · · · · · · · · · · · · · · · · ·	<u> </u>	
b	If "Yes" on line 3a(ii), are the related organiz	ations listed as require	d on Schedule R?				3b	_	
4	Describe in Part XIII the intended uses of th								
Pa	rt VI Land, Buildings, and Equ								
	Complete if the organization	n answered "Yes"	on Form 990, Pa	art IV, line 11a	. See Form	990, Par	t X, line	10.	
	Description of property	(a) Cost or other	basis (b) Cost o	r other basis	(c) Accumulate	ed	(d) Bo	ok value	Э
		(investment)	,	ther)	depreciation				
1a	Land			262,633				<u> 262</u>	<u>, 633</u>
b	Buildings								
	Leasehold improvements			400 705	200	0.66			000
d	35 F 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			422,705	328	,869			, 836
	Other			230,095					, 095 564

Schedule D (Fo	orm 990) 2022	ROCKY	MOUNTAIN	YOUTH	CORPS		85-0404817	Page
Part VII	Investments							
				d "Yes" or			11b. See Form 990, Part X,	
		otion of security ding name of s			(b) B	ook value	(c) Method of valuation Cost or end-of-year market	
(1) Financial of	derivatives							
(2) Closely he	ld equity interests							
(3) Other								
(C)								
(E)								
(F)								
(G) (H)								
	h) must equal Fo	990 Pa	ert X, col. (B) line 12	 2)				
Part VIII	Investments			/				
		•		d "Yes" or	Form 990.	Part IV. line	11c. See Form 990, Part X,	line 13.
	<u> </u>	escription of inv				ook value	(c) Method of valuation Cost or end-of-year market	1:
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
			rt X, col. (B) line 13	3.)	.			
Part IX	Other Assets					5 . 0.4	444.0 5 000 5 134	
	Complete if the	ne organi			1 Form 990,	Part IV, line	11d. See Form 990, Part X,	
(4)	ם די	TCUM C	F USE ASS	a) Description				(b) Book value 246, 43 0
(1)		EPOSIT)E1				3,00
(2)	<u>DI</u>	<u> </u>	5					3,00
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
	• •		rt X, col. (B) line 15	5.)				249,43
Part X	Other Liabili				_			
	Complete if the line 25.	ne organi	zation answere	d "Yes" or	n Form 990,	Part IV, line	11e or 11f. See Form 990, F	'art X,
1.			(a) De	scription of liabilit	у			(b) Book value
(1) Federal	income taxes							
(2) LEASE	LIABILITY-	- ROU A	SSET					248,83
	NSATED ABSI	ENCES						34,01
(4)								
(5)								
(6)								
(7)								
(8)								
(9)	(h) must squal Ea	rm 900 Pa	rt X, col. (B) line 25	5.)				282,85
· Juli (Oblaitil	ı _(D) ınusı c yual F0	ıııı əəu, Fa	л. л, оот. (D) IIIIC 23	··/				_52,55

TAX POSITIONS TAKEN FOR OPEN TAX YEARS. MANAGEMENT BELIEVES THAT THE ACTIVITIES OF RMYC ARE WITHIN THEIR TAX-EXEMPT PURPOSE, AND THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE DISCLOSURE OR RECOGNITION IN THE FINANCIAL STATEMENTS.

Schedule D (Fo	orm 990) 2022	ROCKY	MOUNTAIN	YOUTH	CORPS	85-0404817	Page 5
Part XIII	orm 990) 2022 Supplementa	I Inform	nation (continue	ed)			
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_							
• • • • • • • • • • • • • • • • • • • •							
• • • • • • • • • • • • • • • • • • • •							
• • • • • • • • • • • • • • • • • • • •							
• • • • • • • • • • • • • • • • • • • •							

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Employer identification number

ROCKY MOUNTAIN YOUTH CORPS

85-0404817

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

RMYC INSPIRES YOUNG ADULTS TO MAKE A DIFFERENCE IN THEMSELVES AND THEIR

COMMUNITIES. THROUGH TRAINING AND TEAM SERVICE, RMYC IS A STEPPING STONE TO

NEW OPPORTUNITIES. USING A CREW-BASED YOUTH CORPS MODEL, RMYC PEOPLE AND

PROGRAMS HELP IMPROVE THE SCHOOLS AND LANDSCAPES OF NORTHERN NEW MEXICO.

FORM 990 - ORGANIZATION'S MISSION

ROCKY MOUNTAIN YOUTH CORPS IS A STEPPING STONE TO NEW OPPORTUNITIES. WE
INSPIRE YOUNG ADULTS TO MAKE A POSITIVE DIFFERENCE IN THEMSELVES AND THEIR
COMMUNITIES. THROUGH TRAINING AND SERVICE, CORPS MEMBERS DISCOVER THEIR
POTENTIAL FOR HEALTHY, PRODUCTIVE LIVES.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

TRAINING- THE LEADERSHIP AND TRAINING CENTER IS THE INTERNAL TRAINING

PROVIDER FOR RMYC THAT ALSO OFFERS ITS POWERFUL TRAINING TO COMMUNITY

PARTNERS. THE STAFF OF THIS PROGRAM OFFER PROJECT SPECIFIC TRAININGS,

WORKFORCE DEVELOPMENT TRAININGS, AND PERSONAL LEADERSHIP TRAININGS TO

RMYC€™S MEMBERS. IN ADDITION, THE ROPES COURSE IS OFFERED TO EVERY CREW

BUT ALSO MADE AVAILABLE TO COMMUNITY ORGANIZATIONS LOOKING TO TAKE

ADVANTAGE OF THE TEAM-BUILDING, LEADERSHIP PREPARATION, AND PERSONAL GOAL—

SETTING OPPORTUNITIES THE ROPES COURSE HAS TO OFFER.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE 990 IS PRESENTED TO THE EXECUTIVE DIRECTOR FOR REVIEW, REVIEWED BY AT

LEAST ONE OFFICER ON THE BOARD OF DIRECTORS, AND THEN SIGNED BY THE

Schedule O (Form 990) 2022 Page 2 Name of the organization Employer identification number 85-0404817 ROCKY MOUNTAIN YOUTH CORPS EXECUTIVE DIRECTOR. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY THE BOARD OF DIRECTORS REVIEWS THE CONFLICT OF INTEREST POLICY ANNUALLY AND TAKES APPROPRIATE ACTION AS NECESSARY. FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL TO DETERMINE THE COMPENSATION FOR THE EXECUTIVE DIRECTOR, THE BOARD OF DIRECTORS CONDUCTS A STUDY OF COMPENSATION FOR SIMILAR ORGANIZATIONS AND POSITIONS. FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS THE BOARD OF DIRECTORS CONDUCTS A STUDY OF COMPENSATION FOR SIMILAR ORGANIZATIONS AND POSITIONS. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ORGANIZATION GOVERNING DOCUMENTS ARE AVAILABLE ON REQUEST.

PAGE 1 OF 1

Form **8868**

(Rev. January 2022)

Department of the Treasury

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

▶ File a separate application for each return.
 ▶ Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Internal Revenue Service

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

filing	of this fo	rm, visit <i>www.irs.gov/e-file-providers/e-file-for-chai</i>	rities-and-n	on-profits.					
Auto	omatic	6-Month Extension of Time. Only subr	mit origina	al (no copies needed).					
		ns required to file an income tax return other than F			tnerships, REMIC	s, and trusts			
must	use For	m 7004 to request an extension of time to file incor	ne tax retur	ns.					
Туре	or	Name of exempt organization or other filer, see i	nstructions.		Taxpayer identific	rer identification number (TIN)			
print		DOCKY MOUNTAIN VOLUMI COL	05 040401	1 7					
		ROCKY MOUNTAIN YOUTH COI	85-040481	L /					
-:- L	41	Number, street, and room or suite no. If a P.O. b PO BOX 1960	ox, see insi	ructions.					
File by due da		City, town or post office, state, and ZIP code. Fo	r a foreign a	address, see instructions					
filing yo		0.9, o. post oo, o, a <u></u>							
return. instruct		RANCHOS DE TAOS NM	8755	7					
Entor	the Pet	urn Code for the return that this application is for (f	ile a cepara	te application for each return	\		01		
			пе а зерага)				
	plicatior -	1	Return	Application			Return		
Is F		* Farm 000 F7	Code	Is For			Code		
Form 990 or Form 990-EZ			01	Form 1041-A Form 4720 (other than indi	vidual)		08		
Form 4720 (individual) Form 990-PF			03	Form 5227	viduai)		10		
Form 990-T (sec. 401(a) or 408(a) trust)			05	Form 6069			11		
Form 990-T (trust other than above)			06	Form 8870	Form 8870				
Form 990-T (corporation) 07									
		ROSANNA ARAGON							
		1203 KING DR, UNIT 3	3						
• T	he books	are in the care of ▶TAOS				NM 8	37571		
_	-16	- N- N- E0E-220-1EE0	Г N	- K					
		e No. ► 505-228-1558 Anization does not have an office or place of busine	Fax N				▶ □		
		or a Group Return, enter the organization's four dig							
		group, check this box			and attach				
		names and TINs of all members the extension is fo		т					
1	I reques	st an automatic 6-month extension of time un û 5 /	15/24	, to file the exempt organizati	on return for				
	the orga	anization named above. The extension is for the or	ganization's	return for:					
	ightharpoons	calendar year or							
		, <u>——</u>	16/20/	22					
	► X	tax year beginning $07/01/22$, and ending 0	10/30/	<u> </u>					
2	If the ta	x year entered in line 1 is for less than 12 months,	check reas	on Initial return Fina	al return				
_		hange in accounting period	CHOCK TOUS		arrotarri				
		gg-							
3a	If this ap	oplication is for Forms 990-PF, 990-T, 4720, or 606	39, enter the	e tentative tax, less any					
	nonrefu	ndable credits. See instructions.	3a	\$	0				
b	If this ap	oplication is for Forms 990-PF, 990-T, 4720, or 606	69, enter an	y refundable credits and					
		ed tax payments made. Include any prior year over			3b	\$	0		
С		e due. Subtract line 3b from line 3a. Include your p	•	•		•	0		
C2::4		FTPS (Electronic Federal Tax Payment System). So ou are going to make an electronic funds withdrawa			3c 	\$ 9870	TE for payment		
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For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2022)

citrix | RightSignature

SIGNATURE CERTIFICATE



TRANSACTION DETAILS

Reference Number

C41A8471-B5EA-4AE5-9C6C-20D08A6AB572

Transaction TypeSignature Request

Sent At

05/15/2024 09:18 MST

Executed At

05/15/2024 11:55 MST **Identity Method**

email

Distribution Method

email

Signed Checksum

169a10c152d9d81f773fa5b26c0581915ec1755f8543157bd1b6f12135a0ea0e

Signer Sequencing

Disabled

Document Passcode

Disabled

DOCUMENT DETAILS

Document Name

Rocky Mountain Youth Corps 2022 Form 990 - Attorney General Copy

Filenam

715 KB

Rocky_Mountain_Youth_Corps_2022_Form_990_-_Attorney_General_Copy.pdf

Pages 28 pages Content Type application/pdf File Size

Original Checksum

362b697686f5c2beb36a4d97e1201877c7b25f2cf6490710cf27f53ad45b2f86

SIGNERS

SIGNER	E-SIGNATURE	EVENTS					
Name Thomas, Benjamin	Status signed	Viewed At 05/15/2024 11:55 MST					
Email	Multi-factor Digital Fingerprint Checksum	Identity Authenticated At					
ben@youthcorps.org	273d8bb676373497875c58ac7ae9fba5446ddf93476bc539798c77dad5478a86	05/15/2024 11:55 MST					
Components 2	IP Address 216.158.243.15	Signed At 05/15/2024 11:55 MST					
	Device Chrome via Windows						
	Typed Signature						
	Benjamin C. Thomas						
	Signature Reference ID ED817934						

AUDITS

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