

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

2013

Department of the Treasury

ဇာ

| _  | =   |               |  |  |  |                                  |                 |   |  |  |  |  |
|--|---|---------------|--|--|--|----------------------------------|-----------------|---|--|--|--|--|
| <u>A</u>   | F   | or t          | he 2013 calen                                    | dar year, or tax year beginning $Jan\ 1$ , 2013, and ending  | Jun  |                                  |                 | , 2014                                  |  |  |  |  |
| B Check if applicable C Name of organization COLLECTIVE FOR YOUTH D Employer Identification Number 1 |   |               |  |  |  |                                  |                 |   |  |  |  |  |
|  | l   | ^^            | ddress change                                    | Doing Business As  |  |                                  | 4577            |   |  |  |  |  |
|  | ١   | N             | ame change                                       | Number and street (or P O box if mail is not delivered to street address) Room/sui   | te   | E Telepho                        | one num         | ber                                     |  |  |  |  |
|  |   | In            | itial return                                     | 105 N 31ST AVENUE 103  |  | (40                              | 2) 9            | 32-2025                                 |  |  |  |  |
|  | 1   | ٦٠            | erminated  | City or town, state or province, country, and ZIP or foreign postal code   |  |                                  |                 |   |  |  |  |  |
|  | Ì   | $\neg$        | mended return                                    | OMAHA NE 68131   |  | G Gmss r                         | eceunts         | \$1,315,791.                            |  |  |  |  |
|  | ŀ   | ⊣ .           | pplication pending                               |  | (a) is this a                                    | group return                     |                 |   |  |  |  |  |
|  | L   | ۳.,           | pp   |  | (b) Are all                                      | subordinates                     | included        |   |  |  |  |  |
| $\overline{}$  |   | Tav           | exempt status                                    | X 501(c)(3)   501(c) ( )   (insert no )   4947(a)(1) or   527  | If "No,"   | subordinates<br>attach a list. ( | see instr       | uctions)                                |  |  |  |  |
| ÷  | _   |               | •  |  |  |                                  |                 | •                                       |  |  |  |  |
| <del>-</del>   |   |               |  |  |  | exemption nu                     | -               |   |  |  |  |  |
| K<br>I   | ري  |               | n of organization                                | X   Corporation   Trust   Association   Other ►   L Year of formation  | 201  | 1   M S                          | State of I      | egal domicile NE                        |  |  |  |  |
| Pé   | ır  |               | Summar   |  |  |                                  |                 |   |  |  |  |  |
|  | l   | 1             | _  |  | HE COI   | TINUMM                           | <u>Y _IN</u>    | A PARTNERSHIP                           |  |  |  |  |
| 9  |   |               | THAT BUI   | LDS AND SUSTAINS QUALITY AFTERSCHOOL PROGRAMS.   |  |                                  |                 |   |  |  |  |  |
| Activities & Governance  | ١   |               |  |  |  |                                  |                 | <b></b>                                 |  |  |  |  |
| ē  |   |               | <b>z</b>   |  |  | =                                |                 |   |  |  |  |  |
| õ  |   | 2             |  | x Life the organization discontinued its operations or disposed of more that   |  |                                  |                 | 1                                       |  |  |  |  |
| <u>«</u>   | l   | 3             |  | ting members of the governing body (Part VI, line 1a)  |  |                                  | 3               |   |  |  |  |  |
| es   | l   | 5             |  | of individuals employed in calendar year 2013 (Part V, line 2a)  |  |                                  | 5               | 9                                       |  |  |  |  |
| Ξ  | l   | 6             | Total number                                     | of volunteers (estimate if necessary)  |  |                                  | 6               |   |  |  |  |  |
| Ç  | l   | 7 a           |  |  |  |                                  | 7a              | C                                       |  |  |  |  |
| •  | l   |               | Net unrelated                                    | d business revenue from Part VIII, column (C) tine t2EIVED business taxable income from Form 990-T, line 34  |  |                                  | 7b              |   |  |  |  |  |
| _  | t   |               |  | <u> </u>   | α  | rior Year                        |                 | Current Year                            |  |  |  |  |
|  | l   | 8             | Contributions                                    | and grants (Part VIII, line 1h) $\left  \frac{\infty}{5} \right $ FEB .  |  | ,493,6                           | 5.2             |   |  |  |  |  |
| Revenue  | l   | 9             | Program serv                                     | ce revenue (Part VIII, line 2g)  | <del>                                     </del> | , 493, 6                         | 0.              | 1,315,791.                              |  |  |  |  |
| Ven  | L   | 10            |  | come (Part VIII, column (A), lines 3, 4, and 7d)   | <b>-</b>   |                                  | <u>.</u>        |   |  |  |  |  |
| æ  | 1   | 11            | Other revenue                                    | e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 and Da N, . U.T  | <b></b>  |                                  |                 |   |  |  |  |  |
|  |   | 12            | Total revenue                                    | - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | $-\frac{1}{4}$                                   | ,493,6                           | 52              | 1,315,791.                              |  |  |  |  |
|  | t   | 13            |  | milar amounts paid (Part IX, column (A), lines 1-3)  |  | ,771,8                           |                 | 1,013,479.                              |  |  |  |  |
|  | ı   | 14            |  | ,,,,,,,  | 10.  | 1,013,473.                       |                 |   |  |  |  |  |
|  | ( ), ( ), (   |               |  |  |  |                                  |                 |   |  |  |  |  |
| es   | 15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) |               |  |  |  |                                  |                 |   |  |  |  |  |
| Expenses   | Г   | 16 a          | Professional I                                   | undraising fees (Part IX, column (A), line 11e)  | altitle of star 1                                | Tu an Latin                      |                 | * and the first own and a second of the |  |  |  |  |
| ă  | 1   | b             | Total fundrais                                   | ing expenses (Part IX, column (D), line 25) ► 13,059.  | 學學   |                                  | 经验              | <b>经验证证证</b>                            |  |  |  |  |
| ш  |   | 17            | Other expens                                     | es (Part IX, column (A), lines 11a-11d, 11f-24e)   |  | 365,1                            | 70.             | 222,015.                                |  |  |  |  |
|  |   | 18            | Total expense                                    | es. Add lines 13-17 (must equal Part IX, column (A), line 25)  | 2  | , 925, 4                         | 64.             | 1,801,026.                              |  |  |  |  |
| _  |   | 19            | Revenue less                                     | expenses. Subtract line 18 from line 12  |  | ,568,1                           |                 | -485,235.                               |  |  |  |  |
| 0 0  | T   |               |  |  |  | ng of Curre                      | _               | End of Year                             |  |  |  |  |
| 1 4  |   | 20            | Total assets (                                   | Part X, line 16)   |  | ,944,3                           |                 | 1,688,982.                              |  |  |  |  |
| Net A  |   | 21            |  | s (Part X, line 26)  |  | , , .                            | 0.              | 144,090.                                |  |  |  |  |
| ž  | !   | 22            | Net assets or                                    | fund balances. Subtract line 21 from line 20   | <u> </u>   | ,944,3                           |                 | 1,544,892.                              |  |  |  |  |
| Б  | ㅗ   |               | Signatui   |  |  | , 344, 3                         | 20.             | 1,344,692.                              |  |  |  |  |
|  | _   |               |  |  |  |                                  |                 |   |  |  |  |  |
| com  | er<br>pk  | pena<br>ete D | ities of perjury, I dec<br>lectaration of prepar | fare that I have examined this return, including accompanying schedules and statements, and to the best<br>er (other than officer) is based on all information of which preparer has any knowledge | of my know                                       | ledge and be                     | ief, it is l    | true, correct, and                      |  |  |  |  |
| _  |   |               | T  |  | 11   | 2/21/1                           | 4               |   |  |  |  |  |
| <b>C</b> :   |   | _             | Signatu  | re of officer  | Da<br>Da   | <u>2/31/1</u>                    | <del>-</del>    |   |  |  |  |  |
| Sig  |   |               |  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |  |                                  |                 |   |  |  |  |  |
| Here MEGAN ADDISON / Line EXECUTIVE DIRECTOR  Type or print name and title                           |   |               |  |  |  |                                  |                 |   |  |  |  |  |
| _  |   |               |  |  |  | <del>,,</del>                    |                 | PTIN                                    |  |  |  |  |
|  |   |               |  | 900 × 11-A-  |  | Check [                          | if              |   |  |  |  |  |
| Pa   |   |               | PAUL I   |  | 15   | setf-employe                     | ed              | P00492822                               |  |  |  |  |
|  |   | par           |  |  |  |                                  |                 |   |  |  |  |  |
| Use Only Firm's address ► 20 PEARL ST Firm's EIN ► 42  |   |               |  |  |  |                                  | <u>-1309302</u> |   |  |  |  |  |
|  |   |               |  | COUNCIL BLUFFS IA 51503  |  | Phone no                         | (71             | 2) 322-0277                             |  |  |  |  |
| Ma   |   | 4ba           | IDS discuss thi                                  | s return with the preparer shown above? (see instructions)   |  |                                  |                 | X Yes No                                |  |  |  |  |

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 11/08/13

Form 990 (2013)

|             | 990 (2013) COLLECTIVE FOR YOUTH   | 27-4577729               | Page 2      |
|-------------|---|--------------------------|-------------|
| <u> Par</u> | tilli Statement of Program Service Accomplishments  |                          |             |
|             | Check if Schedule O contains a response or note to any line in this Part III  |                          | <u>    </u> |
| 1           | Briefly describe the organization's mission:  |                          | -           |
|             | TO LEAD THE COMMUNITY IN A PARTNERSHIP  |                          |             |
|             | THAT BUILDS AND SUSTAINS QUALITY AFTERSCHOOL PROGRAMS.  |                          |             |
|             |   |                          |             |
|             |   |                          |             |
| 2           | Did the organization undertake any significant program services during the year which were not listed on the p  | onor                     |             |
|             | Form 990 or 990-EZ?   | Yes                      | X No        |
|             | If 'Yes,' describe these new services on Schedule O.  | ш                        |             |
| 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.   |                          | K 1.55      |
| 4           |   | is measured by expens    | ses.        |
|             | Describe the organization's program service accomplishments for each of its three largest program services, a Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported. | of grants and allocation | ns to       |
| 4 a         | (Code: ) (Expenses \$ 1,748,789. including grants of \$ 1,013,479.) (R  | evenue \$                | 0.)         |
|             | COLLECTIVE FOR YOUTH ENGAGES WITH AFTER SCHOOL PROVIDERS ON BUILDING  |                          |             |
|             | THAT SUPPORTS QUALITY STANDARDS, USE OF RELIABLE DATA, AND ACCESS TO P  |                          |             |
|             | OPPORTUNITIES FOR STAFF. COLLECTIVE FOR YOUTH ALSO FOCUSES ON BUILDING C  |                          |             |
|             |   |                          |             |
|             | PROVIDE AFTER SCHOOL PROGRAMS TO SEVEN MIDDLES SCHOOLS IN OMAHA PUBLIC  |                          |             |
|             | SERVED OVER 4,500 STUDENTS AT LEAST 200 DAYS OUT OF THE CALENDAR YEAR. PROGRAMS A   |                          |             |
|             | THAT FOCUS ON ACADEMIC SUPPORT AND ENRISHMENT ACTIVITIES FOR YOUTH. YOU   |                          | REGULARLY   |
|             | IMPROVE THEIR GRADES, SCHOOL ATTENDANCE, AND HAVE LESS NEGATIVE E   | BEHAVIORS.               |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
| 4 b         | (Code: ) (Expenses \$ including grants of \$ ) (R   | evenue \$                |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   | . <b></b>                |             |
|             |   |                          |             |
|             |   | <b></b>                  |             |
|             |   | <b></b>                  | <b></b>     |
|             |   |                          |             |
|             |   |                          |             |
| 4 c         | : (Code ) (Expenses \$ including grants of \$ ) (R  | evenue \$                | ١           |
|             |   | 7                        |             |
|             |   |                          |             |
|             |   | ·                        |             |
|             |   |                          |             |
|             |   | <b></b>                  |             |
|             |   |                          |             |
|             |   |                          |             |
|             |   | . <b></b>                |             |
|             |   |                          |             |
|             |   | <b> </b>                 | <b></b>     |
|             |   |                          |             |
|             |   |                          |             |
|             |   |                          |             |
| 4 d         | Other program services. (Describe in Schedule O.)   |                          |             |
|             | (Expenses \$ including grants of \$ ) (Revenue \$   |                          | 1           |
| 4 0         | Total program service expenses ► 1,748,789.   |                          |             |
| 70          | 1, 170, 103.  |                          |             |

Form 990 (2013) COLLECTIVE FOR YOUTH

Part IV Checklist of Required Schedules

27-4577729

Page 3

|    |   |      | Yes | No       |
|----|---|------|-----|----------|
| 1  | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If Yes,' complete Schedule A  | 1    | х   |          |
| 2  | Is the organization required to complete 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    |     | х        |
| 4  | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If Yes,' complete Schedule C, Part II   | 4    |     | х        |
| 5  | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If Yes,' complete Schedule C, Part III  | 5    |     | х        |
| 6  | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I  | 6    |     | 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? If Yes,' 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 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV              | 9    |     | х        |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If Yes,' complete Schedule D, Part V   | 10   |     | х        |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  |      |     |          |
|    | a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If Yes,' complete Schedule D, Part VI   | 11a  | х   |          |
|    | b Did the organization report an amount for investments — other secunties in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If Yes,' complete Schedule D, Part VII   | 11b  |     | х        |
|    | c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If Yes,' complete Schedule D, Part VIII  | 11 c |     | 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   | 11 d |     | х        |
|    | e Did the organization report an amount for other liabilities in Part X, line 25? If Yes,' complete Schedule D, Part X  | 11 e |     | Х        |
|    | 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  |     | х        |
| 12 | a Did the organization obtain separate, independent audited financial statements for the tax year? If Yes,' complete Schedule D, Parts XI, and XII  | 12a  | х   |          |
|    | 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  |     | х        |
|    | Is the organization a school described in section 170(b)(1)(A)(ii)? If Yes,' complete Schedule E  | 13   |     | X        |
| 14 | a Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  | -   | Х        |
|    | 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  |     | х        |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV  | 15   |     | х        |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If Yes,' complete Schedule F, Parts III and IV   | 16   |     | х        |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)   | 17   |     | х        |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II  | 18   |     | х        |
| 19 | complete Schedule G, Part III   | 19   |     | х        |
| 20 | a Did the organization operate one or more hospital facilities? If Yes,' complete Schedule H  | 20   |     | Х        |
|    | b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20 b |     | <u> </u> |

Form 990 (2013) COLLECTIVE FOR YOUTH 27-4577729 Page 4

| yar         | Tival Checklist of Required Schedules (continued)   |     |     |    |
|-------------|---|-----|-----|----|
|             |   |     | Yes | No |
| 21          | Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If Yes, complete Schedule I, Parts I and II   | 21  | х   |    |
| 22          | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III  | 22  |     | Х_ |
| 23          | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>   | 23  |     | х  |
|             |   | 23  |     |    |
| 24 a        | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a                             | 24a |     | х  |
| t           | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b |     |    |
| c           | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24c |     |    |
| c           | 1 Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?  | 24d |     |    |
| <b>25</b> a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I   | 25a |     | х_ |
| t           | b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I                                       | 25b |     | x  |
| 26          | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If so, complete Schedule L, Part II                                   | 26  |     | X  |
| 27          | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III | 27  |     | х  |
| 28          | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):   | -   |     |    |
| a           | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV   | 28a |     | X  |
| t           | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28b |     | х  |
| •           | c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV  | 28c |     | х  |
| 29          | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M  | 29  |     | X  |
| 30          | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Yes, complete Schedule M  | 30  |     | x_ |
| 31          | Did the organization liquidate, terminate, or dissolve and cease operations? If Yes, 'complete Schedule N, Part I   | 31  |     | Х  |
| 32          | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If Yes, complete Schedule N, Part II  | 32  |     | х  |
| 33          | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If Yes,' complete Schedule R, Part I   | 33  |     | х  |
| 34          | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1   | 34  |     | х  |
| 35 a        | a Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 35a |     | Х  |
| ı           | b If Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If Yes,' complete Schedule R, Part V, line 2   | 35b |     |    |
| 36          | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Yes, complete Schedule R, Part V, line 2  | 36  |     | х  |
| 37          | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If Yes, 'complete Schedule R, Part VI  | 37  |     | х  |
| 38          | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O   | 38  | х   |    |

BAA

|            | 990 (2013) COLLECTIVE FOR YOUTH  | 27-4577                                 | /29          | <u> </u> | age 5       |
|------------|--|---|--------------|----------|-------------|
| <b>Par</b> | Statements Regarding Other IRS Filings and Tax Compliance  |   |              |          |             |
|            | Check if Schedule O contains a response or note to any line in this Part V   |   |              |          | للن         |
| 4.         | Establish symbol appealed in Pay 2 of Form 1006. Establish O. Mach applicability   | ا ـ ا                                   |              | Yes      | No          |
|            | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   | 1 a                                     | 0            |          | ì           |
|            |  |   | 0            |          |             |
|            | Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?   | reportable gaming                       | . 1c         |          |             |
| 2 a        | 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  | 2 a                                     | 0            |          |             |
| b          | If at least one is reported on line 2a, did the organization file all required federal employment tax re   | eturns?                                 | . 2 b        |          |             |
|            | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction  | •                                       |              |          |             |
|            | Did the organization have unrelated business gross income of \$1,000 or more during the year? $\cdot$  |   |              |          | Х           |
| b          | If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule $0 \dots \dots \dots$   | • | . 3 b        |          |             |
| 4 a        | At any time during the calendar year, did the organization have an interest in, or a signature or oth financial account in a foreign country (such as a bank account, securities account, or other financial                     | er authority over, a                    | . 4a         |          | х           |
| b          | If 'Yes,' enter the name of the foreign country: ▶   |   |              |          |             |
|            | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finance   |   |              |          | -           |
|            | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year   |   |              |          | Х           |
|            | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans  |   |              | -        | Х           |
| С          | If Yes,' to line 5a or 5b, did the organization file Form 8886-T?  |   | . <u>5 c</u> |          |             |
| 6 a        | Does the organization have annual gross receipts that are normally greater than \$100,000, and did solicit any contributions that were not tax deductible as charitable contributions?   | the organization                        | . 6a         |          | х           |
| b          | If Yes,' did the organization include with every solicitation an express statement that such contribution tax deductible?  | tions or gifts were                     | . 6ь         |          |             |
| 7          | Organizations that may receive deductible contributions under section 170(c).  |   |              |          |             |
| а          | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for services provided to the payor?  | or goods and                            | . 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 Form 8282?  | was required to file                    | . 7c         |          | х           |
| d          | If 'Yes,' indicate the number of Forms 8282 filed during the year  | 7 d                                     |              |          | 1.2         |
| е          | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit  | t contract?                             | . 7e         |          | Х           |
| f          | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con   | ntract?                                 | . 7f         |          | Х           |
| g          | If the organization received a contribution of qualified intellectual property, did the organization file as required?   | Form 8899                               | . 7g         |          |             |
| h          | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization 1098-C?   | ization file a                          | . 7h         |          |             |
| 8          | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, have exholdings at any time during the year? | xcess business                          | . 8          |          |             |
| 9          | Sponsoring organizations maintaining donor advised funds.  |   |              | 200      |             |
| а          | Did the organization make any taxable distributions under section 4966?  |   | . 9 a        |          |             |
| b          | Did the organization make a distribution to a donor, donor advisor, or related person? $\dots$   |   | . 9 b        |          |             |
| 10         | Section 501(c)(7) organizations. Enter:  |   |              |          |             |
| а          | Initiation fees and capital contributions included on Part VIII, line 12   | 10 a                                    |              |          |             |
| þ          | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10 b                                    |              |          |             |
| 11         | Section 501(c)(12) organizations. Enter:   |   |              |          |             |
|            | Gross income from members or shareholders  | 11 a                                    | _            |          |             |
| b          | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   | 11 Ь                                    |              |          |             |
|            | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo   | orm 1041?                               | . 12a        |          |             |
| b          | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year  | 12 b                                    |              |          |             |
|            | Section 501(c)(29) qualified nonprofit health insurance issuers.   |   |              |          |             |
| а          | Is the organization licensed to issue qualified health plans in more than one state?   | • | 13 a         |          |             |
|            | Note. See the Instructions for additional information the organization must report on Schedule O.  |   |              |          |             |
| Ь          | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  | 13 Ы                                    |              |          |             |
| c          | Enter the amount of reserves on hand   | 13 c                                    |              |          | ,           |
|            | Did the organization receive any payments for indoor tanning services during the tax year?   |   | . 14a        |          | Х           |
|            | If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedu  |   | . 14b        |          | <del></del> |
| BAA        | TEEA0105 07/02/13  |   |              | 990 (    | 2013)       |

Form 990 (2013) COLLECTIVE FOR YOUTH 27-4577729 Page 6 Partivis Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year . . . . . 9 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 in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . . . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х Did the organization delegate control over management duties customanly performed by or under the direct supervision Х Did the organization make any significant changes to its governing documents Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . . . . 5 X 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a Х 8 b Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes Nα 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  $\overline{\mathbf{x}}$ 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 **阿拉斯** Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in х 12 c 13 14 X 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? 15 a 15 b Х If Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a 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 taken steps to safeguard the organization's exempt status with respect to such arrangements?......... 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website . Own website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: COLLECTIVE FOR YOUTH 105 N 31ST AVENUE OMAHA (402) 932-2025

TEEA0106 07/02/13

Form 990 (2013)

BAA

| CHANGE OF ACCOUNTING PERIOD  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
| Form 990 (2013) COLLECTIVE FOR YOUTH 27-4577729 Page   |  |  |  |  |  |  |  |  |  |
| Partivil 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   |  |  |  |  |  |  |  |  |  |
| <ul> <li>1 a 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.</li> <li>List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of</li> </ul>  |  |  |  |  |  |  |  |  |  |
| 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.'   |  |  |  |  |  |  |  |  |  |
| <ul> <li>List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)</li> <li>who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.</li> </ul>  |  |  |  |  |  |  |  |  |  |
| <ul> <li>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.</li> </ul>  |  |  |  |  |  |  |  |  |  |
| <ul> <li>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.</li> </ul>   |  |  |  |  |  |  |  |  |  |
| List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.  |  |  |  |  |  |  |  |  |  |
| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.   |  |  |  |  |  |  |  |  |  |
| (C)  |  |  |  |  |  |  |  |  |  |
| (A) Name and Title  Average hours per house from conficer and a director/trustee)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  (D) Reportable compensation from compensation |  |  |  |  |  |  |  |  |  |
| week (list any house for related organizations for related organizations for related organizations for related organizations heliow dotted line)  Week (list any house or related organizations (W-2/1099-MISC)  Week (list any house organizations (W-2/1099-MISC)  Tomber of the organizations (W-2/1099-MISC)  Website organizations (W-2/1099-MISC)  Tomber organizations (W-2/1099-MISC)  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

| V-5.05 5.05 V.05                      | hours per  |                                |                       |         |              |                                 |        | compensation from                   | compensation from                        | amount of other  |  |
|---------------------------------------|--|--------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-------------------------------------|--|--|--|
|                                       | week (list<br>any hours<br>for related<br>organiza-<br>tions<br>below<br>dotted<br>line) | Individual trustce or director | Institutional trustee | Officer | Key employee | Highest compensated<br>employee | Former | the organization<br>(W-2/1099-MISC) | related organizations<br>(W-2/1099-MISC) | compensation<br>from the<br>organization<br>and related<br>organizations |  |
| _(1) DANIEL PADILLA<br>BOARD MEMBER   | _1.00  | х                              |                       |         |              |                                 |        | 0.                                  | 0.                                       | 0  |  |
| (2) BARB FARHO                        | 1.00   |                                | $\vdash$              |         |              |                                 |        |                                     | <u> </u>                                 | 0.   |  |
| BOARD MEMBER                          | 1-=  | x                              |                       |         |              |                                 |        | o.                                  | 0.                                       | 0.   |  |
| (3) KRISTIN WILLIAMS                  | 1.00   |                                |                       |         |              | Ì                               |        |                                     |  | <u> </u>   |  |
| BOARD MEMBER                          | 1  | х                              |                       |         |              | ļ                               |        | 0.                                  | 0.                                       | O.   |  |
| (4) MATTHEW RAY                       | 1.00   |                                |                       |         |              |                                 |        |                                     |  |  |  |
| BOARD MEMBER                          |  | X                              |                       |         |              |                                 |        | 0.                                  | 0.                                       | 0.   |  |
| (5) STEVE SNODGRASS                   | 1.00   |                                |                       |         |              |                                 |        |                                     |  |  |  |
| BOARD MEMBER                          |  | X                              |                       |         |              |                                 |        | 0.                                  | 0.                                       | 0.   |  |
| (6) DEEPAK KHAZANCHI                  | 1.00   | 1                              |                       |         |              |                                 |        |                                     |  |  |  |
| PRESIDENT                             |  | X                              |                       | Х       | L            |                                 |        | 0.                                  | 0.                                       | 0.   |  |
| _(7)_VIRGIL_JOHNSON                   | 1.00   | ł                              |                       |         |              |                                 |        |                                     |  |  |  |
| VICE PRESIDENT                        | ļ  | X                              | <u> </u>              | X       |              |                                 | _      | 0.                                  | 0.                                       | 0.   |  |
| _(8)_JEFF_COLE                        | 1.00   | ļ                              |                       |         |              |                                 |        |                                     |  |  |  |
| SECRETERY                             | <del> </del>   | X                              | <b>!</b>              | X       | <u> </u>     | <b> </b>                        |        | 0.                                  | 0.                                       | 0.   |  |
| _(9)_TONY_VELAND                      | 1.00   | <b>∤</b>                       | ŀ                     | ١       | l            |                                 |        |                                     |  | _  |  |
| TREASURER                             | 40.00  | X                              | ├                     | X       | ⊢            | <del> </del>                    |        | 0.                                  | 0.                                       | 0.   |  |
| (10) MEGAN ADDISON EXECUTIVE DIRECTOR | 40.00  |                                |                       | x       |              |                                 |        | 0.                                  | 0.                                       | 0.   |  |
| (11)                                  |  |                                |                       |         |              |                                 |        |                                     |  |  |  |
| (12)                                  |  |                                |                       |         |              |                                 |        |                                     |  |  |  |
| (13)                                  |  |                                |                       |         |              |                                 |        |                                     | 1  | <del></del>  |  |
| (14)                                  | <b> </b>   |                                | T                     |         | Г            |                                 |        |                                     |  | <del> </del>   |  |

| Form 990 (2013) COLLECTIVE FOR YOUTH   | •  | Vov.         |                       |          |                             |                                 |              | d Highest Con                       | 27-457772                                | 9 Page 8   |
|--|--|--------------|-----------------------|----------|-----------------------------|---------------------------------|--------------|-------------------------------------|--|--|
| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)  |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (A)<br>Name and title  | Average<br>hours<br>per<br>week  | offi         | icer ar               | nd a d   | more<br>erson is<br>directo | than o<br>s both<br>or/trust    | an<br>90)    | (D)  Reportable compensation from   | (E) Reportable compensation from         | (F) Estimated amount of other  |
|  | (list any<br>hours<br>for<br>related-<br>organiza<br>- tions<br>below<br>dotted<br>line) | or director  | institutional trustee | Officer  | Key employee                | Highest compensated<br>employee | Former       | the organization<br>(W-2/1099-MISC) | related organizations<br>(W-2/1099-MISC) | compensation<br>from the<br>organization<br>and related<br>organizations |
| (15)   |  | $oxed{\top}$ |                       |          |                             |                                 |              |                                     |  |  |
| (16)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (17)   |  | $\vdash$     |                       |          |                             |                                 |              |                                     |  |  |
| (18)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (19)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (20)   |  |              |                       |          |                             |                                 |              |                                     | <del></del>                              | -  |
| (21)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (22)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (23)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (24)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| (25)   |  |              |                       |          |                             |                                 |              |                                     |  |  |
| 1 b Sub-total  |  |              |                       |          |                             |                                 | <b>A A A</b> | 0.                                  | 0.                                       | 0.   |
| 2 Total number of individuals (including but not limited to  |  |              |                       |          |                             |                                 | ive          |                                     |  | mpensation   |
| 3 Did the organization list any former officer, director, on line 1a? If Yes,' complete Schedule J for such indi  4 For any individual listed on line 1a, is the sum of repo | vidual   |              |                       | • •      | - •                         |                                 |              | <del>.</del> <i></i> .              |  | Yes No   |
| 4 For any individual listed on line 1a, is the sum of repo<br>the organization and related organizations greater tha<br>such individual                                      | an \$150,6   | 000?         | 'If 'Y                | es' (    | com                         | plete                           | Scl          | hedule J for                        |  | . 4 X  |
| 5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' cor  |  |              |                       |          |                             |                                 |              |                                     |  | . 5 X  |
| Section B. Independent Contractors  1 Complete this table for your five highest compensated  | l indepe   | nden         | t coi                 | ntrac    | ctors                       | that                            | rec          | eived more than \$                  | 100,000 of                               |  |
| compensation from the organization. Report compens  (A)  Name and business addres  |  | rtne         | cale                  | noai     | r yea                       | ar en                           | aing         | (B) Description of                  | )  | (C) Compensation   |
|  |  |              | <u>—</u>              |          | <del></del>                 |                                 |              |                                     |  |  |
|  |  |              |                       | <u> </u> | _                           |                                 |              |                                     |  |  |
| Total number of independent contractors (including bits)   | ut not lin   | nited        | to th                 |          | liete                       | rd ah                           | OVE          | ) who received mo                   | re than                                  | Andrew The   |
| \$100,000 of compensation from the organization  |  |              | u                     | .036     |                             | ,u au                           | ~*6          | , who received illo                 | io dian                                  |  |

|   | 990 (2013) COLLECTIVE FOR YOUTH  |                       |  | 27-45///29                              | Page 9   |
|---|--|-----------------------|--|---|--|
| Par   | VIII Statement of Revenue  |                       |  |   | _  |
|   | Check if Schedule O contains a response or note to any line                      | e in this Part VIII . |  |   | П  |
|   |  | (A)<br>Total revenue  | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512-514 |
| 2 0   | 1 a Federated campaigns 1 a  | <u> </u>              |  |   |  |
| NTS N   | b Membership dues 1b   |                       |  | 1.5                                     | 7  |
| 30  | c Fundraising events 1 c   |                       |  | ,                                       |  |
| \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \             | d Related organizations 1 d  |                       | ,                                      | ţ                                       |  |
| 불불  |  |                       |  |   |  |
| SIN.  | e Government grants (contributions) 1 e 420,515.                                 |                       | 'n                                     | ,                                       |  |
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | f All other contributions, gifts, grants, and similar amounts not included above |                       |  | ,                                       | ,  |
| DO  | g Noncash contributions included in lines 1a-1f. \$                              | '                     |  | ı                                       | •  |
| 5 ₹   | h Total. Add lines 1a-1f   | 1,315,791.            | 1                                      |   |  |
| E   | Business Code  | <u> </u>              |  | <del>}</del>                            |  |
| /EN   | 2a   |                       |  |   |  |
| E   | b  | -                     |  |   |  |
| 3   | ~ <del></del>  | <del></del>           |  | · · · · · · · · · · · · · · · · · · ·   | <del></del>  |
| M   | <u></u>  |                       |  |   |  |
| I SE  |  | <del></del>           |  | <del></del> -                           | <del></del>  |
| Ž.  | e  |                       |  |   |  |
| OGI   | f All other program service revenue  | <del> </del>          |  | <del>, </del>                           |  |
| 씸   | g Total. Add lines 2a-2f   |                       |  | لمدينية مري والمحدورة                   | <u>*</u>   |
|   | 3 Investment income (including dividends, interest and                           |                       |  |   |  |
|   | other similar amounts)   |                       |  |   |  |
|   | 4 Income from investment of tax-exempt bond proceeds ▶                           |                       |  |   |  |
|   | 5 Royalties  |                       |  | i                                       |  |
|   | (i) Real (ii) Personal   |                       |  | , , , , ,                               | 2.   |
|   | 6 a Gross rents  | ,                     | į.                                     | , ,                                     | -  |
|   | b Less: rental expenses  | •                     | `                                      | ,                                       | <b>)</b>   |
|   | c Rental income or (loss)  |                       | <u></u>                                | ,                                       | \$   |
|   | d Net rental income or (loss)  | <del></del>           | · <del>  </del>                        | ······································  | <u> </u>   |
|   | (i) Securities (ii) Other  |                       | <del></del>                            | ,                                       | ,  |
|   | 7 a Gross amount from sales of assets other than inventory.                      | , '                   |  | , ,                                     |  |
|   | ·  | '                     | 1                                      | 1                                       |  |
|   | b Less: cost or other basis  | •                     | , .                                    |   |  |
|   | and sales expenses   |                       |  | ,                                       | ,  |
|   | c Gain or (loss)   |                       |  |   | <del></del>  |
|   | d Net gain or (loss)   |                       |  |   | 7  |
| ш   | 8 a Gross income from fundraising events   |                       | 4                                      | ,                                       |  |
| _ ₹   | (not including\$   |                       | ;                                      |   | 1  |
| 돏   | of contributions reported on line 1c).   |                       | <u>'</u>                               | 1                                       |  |
| 2   | See Part IV, line 18 a   |                       | '                                      | ,                                       |  |
| OTHER REVENU                                      | b Less: direct expenses b  |                       |  | i.                                      |  |
| 0   | c Net income or (loss) from fundraising events                                   |                       | ]                                      |   |  |
|   | 9 a Gross income from gaming activities<br>See Part IV, line 19 a                | , <del>-</del>        |  | · ·                                     |  |
|   | b Less: direct expenses b  |                       |  |   | ī  |
|   | ·  |                       | ·                                      |   | <u> </u>   |
|   | c Net income or (loss) from gaming activities                                    |                       | <del> </del>                           | <del> </del>                            |  |
|   | 10 a Gross sales of inventory, less returns and allowances                       |                       | ,                                      |   | 1  |
|   | b Less: cost of goods sold b   |                       |  |   |  |
|   | c Net income or (loss) from sales of inventory ▶                                 |                       |  |   |  |
|   | Miscellaneous Revenue Business Code  |                       |  | ,                                       |  |
|   | 11a  | <del></del>           |  |   | \  |
|   | b  | <del></del>           |  |   |  |
|   | c  |                       |  |   |  |
|   | d All other revenue  | <del></del>           | <del> </del>                           | <del></del>                             | <del></del>  |
|   | e Total. Add lines 11a-11d   |                       | <del> </del>                           |   | <del> </del>   |
|   |  |                       | ,                                      | ļ <u>-</u>                              | <del></del>  |
|   | 12 Total revenue. See instructions   | 1.315.791             | 1                                      | 1                                       | ŀ  |

BAA

Form 990 (2013) COLLECTIVE FOR YOUTH

27-4577729

Page 10

PartiX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). (D) Fundraising (A) Total expenses Do not include amounts reported on lines Program service Management and 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the United States. See 1,013,479 1,013,479 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members. . . . . . . Compensation of current officers, directors, trustees, and key employees . . . . . . . 61,546 49,237 9,232 3,077. Compensation not included above, to Other salanes and wages. . . . . . . . 412,599 392,794 14,854 4,951. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)........... 6,540 8,175 .226 409. Other employee benefits . . . . . . <u>49,7</u>19 548. 47,526 1,645 33,493 26,794 5,024 1,675. Fees for services (non-employees): 1,826 274 <u>1,461</u> 91. c Accounting . . . . . . . . . . . . 10,862 8,690 629 543. e Professional fundraising services See Part IV, line 17 . f Investment management fees . . . . . . . . Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O). . . 147,196 147,196 0 0. Office expenses . . . . . . . . . . 8,475 6,780 271 424. Information technology . . . . . . 2,042 1,634 306 102. 15 Occupancy . . . . . . . . 16 16,719. 13,375 2,508 836. 12,908 12,908 0 <u>0.</u> Payments of travel or entertainment 18 expenses for any federal, state, or local 19 Conferences, conventions, and meetings . . . 13,931 13,931 0 0. 20 Interest............. 4. 68 13 21 22 Depreciation, depletion, and amortization . . . 1,038 830 156 52. 6,340 5.072 951 317 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a MISCELLANEOUS \_ \_ 593 89 474 e All other expenses . . . . . . . . . . . . . . . 25 Total functional expenses. Add lines 1 through 24e. . 1,801,026 1,748,789 39,178 13,059 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). . . .

Form 990 (2013) COLLECTIVE FOR YOUTH 27-4577729 Page 11 Part X Balance Sheet (B) Beginning of year End of year 1,035,560. 1,424,531 2 3 4 94,745 Loans and other receivables from current and former officers, directors, 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 8 ۵ 019 10 a 8.353 10 c 7.315 511,436 11 544,843. 12 12 13 13 14 14 15 15 500 16 16 1,944,320 688,982 17 17 142,755 18 18 19 19 335 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D . . . . . . . . 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 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 of Schedule D . . . 25 Total liabilities. Add lines 17 through 25............. 26 0 26 144,090 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 27 161,775 590,560 E 28 782,545 28 954,332 29 29 Q R Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. FUND 30 30 Paid-in or capital surplus, or land, building, or equipment fund . . . . . . . . . . . . . . . . . 31 31 BALANCES Retained earnings, endowment, accumulated income, or other funds . . . . . . . . . . . . 32 32 33 1,944,320 33 1,544,892 34 

TEEA0111 07/08/13

BAA

1,688,982

Form 990 (2013)

| Form 990 (2013) COLLECTIVE FOR YOUTH   | <u>27-457</u>    | 7729 <u> </u>     | Page 1             |
|--|------------------|-------------------|--------------------|
| PartiXIII Reconciliation of Net Assets   |                  |                   |                    |
| Check if Schedule O contains a response or note to any line in this Part XI  |                  | <u></u>           | <u>.</u> [x        |
| 1 Total revenue (must equal Part VIII, column (A), line 12)  | · · · · <u>1</u> | 1,:               | 315,791.           |
| 2 Total expenses (must equal Part IX, column (A), line 25)   | 2                |                   | 801,026            |
| 3 Revenue less expenses. Subtract line 2 from line 1   | 3                | _                 | 485,235            |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  | 4                | 1                 | 944,320.           |
| 5 Net unrealized gains (losses) on investments   | 5                | 1                 | 33,407.            |
| 6 Donated services and use of facilities   | 6                | l                 |                    |
| 7 Investment expenses  |                  |                   |                    |
| 8 Prior period adjustments   |                  |                   |                    |
| 9 Other changes in net assets or fund balances (explain in Schedule O)   | 9                |                   | 52,400.            |
| Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,   |                  |                   |                    |
| column (B)).   | 10               | 1,5               | <u>544,892.</u>    |
| Part XIII Financial Statements and Reporting   |                  |                   |                    |
| Check if Schedule O contains a response or note to any line in this Part XII   |                  | <u>.</u> .        | <u></u> [x         |
|  |                  |                   | Yes No             |
| 1 Accounting method used to prepare the Form 990: Cash X Accrual Other   |                  |                   |                    |
| If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  | ****             | To be provided in |                    |
| 2 a Were the organization's financial statements compiled or reviewed by an independent accountant?  |                  | 2 8               | X                  |
| If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:   | red on a         |                   |                    |
| Separate basis Consolidated basis Both consolidated and separate basis   |                  |                   |                    |
| b Were the organization's financial statements audited by an independent accountant?   |                  | 2 t               | X                  |
| If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ  | ate              |                   |                    |
| basis, consolidated basis, or both:  |                  |                   |                    |
| X   Separate basis   |                  | 2.0               |                    |
| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of<br>review, or compilation of its financial statements and selection of an independent accountant? | the audit,       | 20                | x                  |
| If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  |                  |                   |                    |
| 3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?  | Single           | 3а                | X                  |
| b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the rec   | quired audit     |                   |                    |
| or audits, explain why in Schedule O and describe any steps taken to undergo such audits   | ·                | 3 t               | x                  |
| BAA  |                  |                   | n <b>990</b> (2013 |

# CHANGE OF ACCOUNTING PERIOD Public Charity Status and Public Support

**SCHEDULE A** 

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013



Schedule A (Form 990 or 990-EZ) 2013

| COLI       | ECTIVE FOR YOUT   | rh  |  |  |                                 |   |                       | 27-45  | 577729                 | 9 ·                 |         |             |
|------------|---|---|--|--|---------------------------------|---|-----------------------|--|------------------------|---------------------|---------|-------------|
| Part       | I <b>☞</b> Reason for Pub   | lic Charity Status                              | (All organizations   | must co  | mplete                          | this p  | art.) S               | ee inst  | ruction                | s.                  |         |             |
| The or     | ganization is not a private   | foundation because it                           | is: (For lines 1 through   | 11, chec   | only on                         | e box.)   |                       |  |                        |                     |         |             |
| 1          | A church, convention  | of churches or associa                          | tion of churches describ   | ed in sec  | tion 17                         | D(b)(1)(A                                       | A)(i).                |  |                        |                     |         |             |
| 2          | A school described in   | section 170(b)(1)(A)(i                          | II). (Attach Schedule E.)  |  |                                 |   |                       |  |                        |                     |         |             |
| 3          |   |   | organization described in  |  | 170(b)(                         | 1)(A)(iii                                       | ١.                    |  |                        |                     |         |             |
| 4          |   |   | conjunction with a hosp  |  |                                 |   |                       | )(A)(iii).                                       | Enter th               | e hospital's        |         |             |
|            | name, city, and state:  |   | ,  |  |                                 |   |                       | , , , , , ,                                      |                        |                     |         |             |
| 5          |   | ated for the benefit of a                       | college or university ow   | ned or o   | perated i                       | y a gov   | emment                | al unit d  | escnbed                | in section          |         |             |
| 6          |   |   | mmental unit described   | in sectio  | on 170(b                        | )(1)(A)(\                                       | /).                   |  |                        |                     |         |             |
| 7          | X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) |   |  |  |                                 |   |                       |  |                        |                     |         |             |
| 8          | A community trust de  | scribed in section 170(                         | (b)(1)(A)(vi). (Complete   | Part II.)  |                                 |   |                       |  |                        |                     |         |             |
| 9          |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
| 10         |   |   | lusively to test for public  |  |                                 |   |                       |  |                        |                     |         |             |
| 11         |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
|            | a Type I b  | .   1,750                                       | 1 1.762  |  |                                 | c   |                       |  |                        | nctionally in       | tegrate | ed          |
| е          | By checking this box, other than foundation section 509(a)(2).  | I certify that the organizmanagers and other th | zation is not controlled di<br>an one or more publicly   | lirectly or<br>supporte                                | indirect<br>ed organ            | ly by one<br>izations                           | e or more<br>describe | e disqua<br>ed in sec                            | lified per<br>tion 509 | rsons<br>(a)(1) or  |         |             |
| f          | If the organization red   | eived a written determi                         | nation from the IRS that   | is a Typ   | e I, Type                       | II or Ty  | pe III su             | pporting   | organiza               | ation,              |         | . 🛮         |
| g          | Since August 17, 200  | 6, has the organization                         | accepted any gift or co  | ntributior   | from ar                         | ny of the                                       | followin              | g persor   | ns?                    |                     |         |             |
|            |   |   | trols, either alone or toge<br>orted organization?   |  |                                 |   |                       |  |                        | 11g (i)             | Yes     | No          |
|            | (ii) A family member  | er of a nerson describer                        | d in (i) above?  |  |                                 |   |                       |  |                        | . 11g (ii)          |         |             |
|            | , ,   | •   | scribed in (i) or (ii) above   |  |                                 |   |                       |  |                        |                     |         | <del></del> |
| h          |   |   | upported organization(s  |  |                                 |   |                       |  |                        | 11 g (iii)          |         | L           |
|            |   | <del></del>                                     |  | 1  |                                 | <del></del>                                     |                       |  |                        |                     |         |             |
|            | (i) Name of supported<br>organization   | (II) EIN  | (iii) Type of organization<br>(described on lines 1-9<br>above or IRC section<br>(see instructions)) | (Iv) Is<br>organiza<br>column (I)<br>your gov<br>docum | ation in<br>Isted in<br>Verning | (v) Did yo<br>the organi;<br>column (i)<br>supp | zation în             | (vi) Is<br>organiza<br>colum<br>organized<br>U S | ation in               | (vli) Amount<br>sup |         | itary       |
|            |   |   |  | Yes  | No                              | Yes   | No                    | Yes  | No                     |                     |         |             |
|            |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
| (A)        |   |   |  |  | ļ                               |   |                       |  |                        | _                   |         |             |
| (B)        |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
|            |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
| (C)        |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
| <u>(D)</u> |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |
| (E)        |   | 70,564  | mar dage of Market and the second  | tin met  | Arrian                          | January 2000                                    | 10000                 | Market of a                                      |                        |                     |         |             |
| Total      |   |   |  |  |                                 |   |                       |  |                        |                     |         |             |

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

COLLECTIVE FOR YOUTH

27-4577729

Page 2

Part III 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  |  |   | · · · · · · · · · · · · · · · · · · ·        |   |                                    |              |
|--------------|---|--|---|--|---|------------------------------------|--------------|
| Cale<br>begi | ndar year (or fiscal year<br>nning in) ►  | (a) 2009                                     | <b>(b)</b> 2010                           | (c) 2011                                     | (d) 2012  | (e) 2013                           | (f) Total    |
| 1            | Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants ')  |  | 591,488.                                  | 1,220,225.                                   | 4,493,652.  | 1,315,791%                         | 7,621,156.   |
| 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  | .,   | 591,488.                                  | 1,220,225.                                   | 4,493,652.  | 1,315,791.                         | 7,621,156.   |
| 5            | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |  |   |  |   |                                    |              |
| 6            | Public support. Subtract line 5   |  |   |  |   |                                    | 3,153,453.   |
| Sac          | from line 4   |  |   |  |   |                                    | 4,467,703.   |
| Cale         | ndar year (or fiscal year<br>nning in) ►  | (a) 2009                                     | <b>(b)</b> 2010                           | (c) 2011                                     | (d) 2012  | (e) 2013                           | (f) Total    |
| _            | Amounts from line 4   |  | 591,488.                                  | 1,220,225.                                   | 4,493,652.  | 1,315,791.                         | 7,621,156.   |
| 8            | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  |  |   |  |   |                                    |              |
| 9            | Net income from unrelated business activities, whether or not the business is regularly carned on   |  |   |  |   |                                    |              |
| 10           | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   |  | 71  |  |   |                                    |              |
| 11           | Total support. Add lines 7 through 10   |  |   |  | <b>VALUE</b>                                      | <b>第二十二</b>                        | 7,621,156.   |
| 12           | Gross receipts from related activity  | es, etc (see instruc                         | ctions)                                   |  |   | 12                                 |              |
|              | First five years. If the Form 990 is organization, check this box and s   | top here                                     | · · · · · · · · · · · ·                   | third, fourth, or fifth                      | tax year as a sect                                | ion 501(c)(3)                      | <b>. ×</b> X |
|              | tion C. Computation of Pu   |  |   |  |   |                                    |              |
|              | Public support percentage for 201   |  |   |  |   |                                    | %_           |
| 15           | Public support percentage from 20   | 012 Schedule A, Pa                           | art II, line 14                           |  | · · · · · · · · · · · ·                           | 15_                                |              |
| 16 a         | 33-1/3% support test — 2013. If and stop here. The organization of  | the organization di<br>qualifies as a public | d not check the bo<br>dry supported organ | x on line 13, and the nization               | he line 14 is 33-1/3                              | % or more, check                   | this box     |
| t            | 33-1/3% support test — 2012. If t<br>and stop here. The organization of   |  |   |  |   |                                    |              |
| 17 a         | 10%-facts-and-circumstances te<br>or more, and if the organization me<br>the organization meets the 'facts-a  | eets the 'facts-and-                         | -circumstances' tes                       | st, check this box a                         | and stop here. Exp                                | lain in Part IV how                | _            |
|              | 10%-facts-and-circumstances to<br>or more, and if the organization morganization meets the 'facts-and-  | eets the 'facts-and-<br>circumstances' tes   | -circumstances' tes<br>t The organization | st, check this box a<br>n qualifies as a pub | and <b>stop here.</b> Exp<br>plicly supported org | plain in Part IV how<br>panization | the ▶ □      |
| 18           | Private foundation. If the organiz  | ation did not check                          | a box on line 13,                         | 16a, 16b, 17a, or                            | 17b, check this box                               | and see instructio                 | ns ▶ 🏻       |

Schedule A (Form 990 or 990-EZ) 2013

COLLECTIVE FOR YOUTH

27-4577729

Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

| Sec      | tion A. Public Support  |                      |                     |                               |  |                 |                   |
|----------|---|----------------------|---------------------|-------------------------------|--|-----------------|-------------------|
| Calen    | far year (or fiscal yr beginning in) ►                                  | (a) 2009             | (b) 2010            | (c) 2011                      | (d) 2012   | (e) 2013        | (f) Total         |
| 1        | Gifts, grants, contributions and membership fees                        |                      |                     |                               |  |                 |                   |
|          | received. (Do not include any 'unusual grants.').                       |                      |                     |                               |  |                 |                   |
| 2        | Gross receipts from admis-  |                      |                     |                               |  | <u> </u>        | <del></del> -     |
| _        | sions, merchandise sold or  |                      |                     | Ì                             |  |                 |                   |
|          | services performed, or facilities furnished in any activity that is     |                      |                     |                               |  |                 |                   |
|          | related to the organization's   |                      |                     |                               |  | -               |                   |
| 3        | tax-exempt purpose  |                      |                     |                               |  |                 |                   |
| •        | that are not an unrelated trade   |                      |                     | i                             |  |                 |                   |
|          | or business under section 513   |                      |                     |                               |  | , <u>_</u> .    |                   |
| 4        | Tax revenues levied for the<br>organization's benefit and               |                      |                     |                               |  |                 |                   |
|          | either paid to or expended on   |                      |                     |                               |  |                 |                   |
| 5        | its behalf  |                      |                     |                               |  |                 | <del></del>       |
|          | facilities furnished by a   |                      |                     |                               |  |                 |                   |
|          | governmental unit to the organization without charge                    |                      |                     |                               |  |                 |                   |
| 6        | Total. Add lines 1 through 5  |                      |                     |                               | · <del>-</del> · · · · · · · · · · · · · · · · · · · |                 | <del></del>       |
| 7 a      | 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                                |                      |                     |                               |  |                 |                   |
| c        | Add lines 7a and 7b   |                      |                     |                               |  | <del>,</del> .  | <del> </del>      |
| _        | Public support (Subtract line   |                      |                     |                               |  |                 | <u> </u>          |
|          | 7c from line 6.)  |                      |                     |                               |  |                 |                   |
|          | tion B. Total Support   |                      | <u> </u>            |                               |  |                 | <del></del>       |
|          | dar year (or fiscal yr beginning in) 🕨                                  | (a) 2009             | <b>(b)</b> 2010     | (c) 2011                      | (d) 2012   | (e) 2013        | (f) Total         |
|          | Amounts from line 6   |                      |                     | _                             |  |                 |                   |
| TUA      | Gross income from interest, dividends, payments received                |                      |                     |                               |  |                 |                   |
|          | on secunties loans, rents,  |                      |                     |                               |  |                 |                   |
|          | royalties and income from similar sources                               |                      |                     |                               |  |                 |                   |
| b        | Unrelated business taxable  |                      |                     |                               |  |                 |                   |
|          | income (less section 511 taxes) from businesses                         |                      |                     |                               |  |                 |                   |
|          | acquired after June 30, 1975  |                      |                     |                               |  |                 |                   |
|          | Add lines 10a and 10b   |                      |                     |                               |  |                 |                   |
| 11       | Net income from unrelated business activities not included in line 10b, |                      |                     |                               |  |                 |                   |
|          | whether or not the business is  |                      |                     |                               |  |                 |                   |
|          | regularly carried on  |                      |                     |                               |  |                 |                   |
| 12       | Other income Do not include gain or loss from the sale of               |                      |                     |                               |  |                 |                   |
|          | capital assets (Explain in Part IV.)                                    |                      |                     |                               |  |                 |                   |
| 13       | Total Support. (Add Ins 9,10c, 11 and 12)                               | <del></del>          |                     |                               | ·  |                 | <del></del>       |
| 14       | First five years. If the Form 990 is                                    | for the organization | on's first, second, | third, fourth, or fifth       | tax year as a sect                                   | tion 501(c)(3)  |                   |
| <u> </u> | organization, check this box and s                                      |                      |                     | · · · · · · · · · · · ·       | <del> </del>   | <u> </u>        |                   |
|          | tion C. Computation of Pu   |                      |                     | 2 (0)                         |  | 1 4             | - 1               |
|          | Public support percentage for 201<br>Public support percentage from 20  | •                    | •                   |                               |  |                 | <del></del>       |
|          | tion D. Computation of Inv  |                      |                     |                               | · · · · · · · · · · · · · · · · · · ·                | 10              | 6 8               |
| 17       | Investment income percentage for  |                      |                     |                               | W  | 1               | 7 8               |
| 18       | Investment income percentage fro  |                      |                     |                               |  |                 | <del></del>       |
|          | 33-1/3% support tests - 2013, if  | the organization d   | id not check the b  | ox on line 14, and I          | ine 15 is more tha                                   | n 33-1/3%, and  | line 17           |
|          | is not more than 33-1/3%, check the                                     | nis box and stop h   | ere. The organiza   | tion qualifies as a           | oublicly supported                                   | organization    |                   |
| b        | 33-1/3% support tests — 2012. If line 18 is not more than 33-1/3%,      | the organization d   | id not check a box  | on line 14 or line francation | 19a, and line 16 is                                  | more than 33-1/ | /3%, and tion ▶ □ |
| 20       | Private foundation. If the organiz                                      |                      |                     |                               |  |                 |                   |
|          |   |                      |                     |                               |  |                 |                   |

| Schedule A | (Form 990 or 990-EZ) 2013   | COLLECTIVE                          | FOR :               | YOUTH  |   | 27-4577729        | Page 4     |
|------------|---|-------------------------------------|---------------------|--|---|-------------------|------------|
| Part IV    | Supplemental Informa or 17b; and Part III, line (See instructions). | tion. Provide th<br>12. Also comple | e expla<br>ete this | anations required by<br>part for any additio | y Part II, line 10;<br>nal information. | Part II, line 17a | _          |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  | <b>-</b>                                |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  | - <b></b>                               |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   | · <b></b>  |
|            |   |                                     |                     |  |   |                   | ·          |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   | · <b>-</b> |
|            |   |                                     |                     |  |   |                   |            |
|            |   |                                     |                     |  |   |                   | · <b></b>  |

# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

**ා** මුතාල දිණ්මල මිතුලේමත Employer Identification number

| COI   | DLLECTIVE FOR YOUTH   | 27-4577729   |
|-------|---|--|
|       | Organizations Maintaining Donor Advised Funds or Other Similar F  | unds or Accounts.  |
| [[sai | Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.   | ,  |
|       | (a) Donor advised funds   | (b) Funds and other accounts   |
| 1     | Total number at end of year   | (-)  |
| 2     | Aggregate contributions to (during year)  |  |
| 3     | Aggregate grants from (during year)   | <del></del>  |
| 4     | Aggregate value at end of year  | <del></del>  |
| _     |   |  |
| 5     | 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor are the organization's property, subject to the organization's exclusive legal control?  | No Yes   |
| 6     | 5 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds or for charitable purposes and not for the benefit of the donor or donor advisor, or for any other pur impermissible private benefit?  | pose conferring  |
| Pãi   | Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.   |  |
| 1     | Purpose(s) of conservation easements held by the organization (check all that apply).   |  |
|       | Preservation of land for public use (e.g., recreation or education)   | of an historically important land area   |
|       |   | of a certified historic structure  |
|       | Preservation of open space  |  |
| 2     |   | form of a conservation easement on the   |
|       | last day of the tax year.   |  |
|       |   | Held at the End of the Tax Year  |
|       | a Total number of conservation easements  |  |
|       | <b>b</b> Total acreage restricted by conservation easements   |  |
|       | c Number of conservation easements on a certified historic structure included in (a)  | 2c   |
| 1     | d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  | 2d   |
| 3     | Number of conservation easements modified, transferred, released, extinguished, or terminated tax year ►  | by the organization during the   |
| 4     | Number of states where property subject to conservation easement is located ▶   |  |
| 5     | Does the organization have a written policy regarding the penodic monitoring, inspection, handli  | ng of violations,  |
|       | and enforcement of the conservation easements it holds?   | No Yes   |
| 6     | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easemed   | ents during the year   |
|       | • — — — — — — — — — — — — — — — — — — —   |  |
| 7     | 3,  | during the year  |
|       | <b>►</b> \$   |  |
| 8     | and section 170(h)(4)(B)(II)?   | <b></b>  |
| 9     | 9 In Part XIII, describe how the organization reports conservation easements in its revenue and exinclude, if applicable, the text of the footnote to the organization's financial statements that described conservation easements   | nbes the organization's accounting for   |
| Рā    | Organizations Maintaining Collections of Art, Historical Treasures, Complete if the organization answered 'Yes' to Form 990, Part IV, line 8  | or Other Similar Assets.   |
| 1     | 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue<br>art, historical treasures, or other similar assets held for public exhibition, education, or research<br>in Part XIII, the text of the footnote to its financial statements that describes these items. | statement and balance sheet works of in furtherance of public service, provide,      |
|       | b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue sta<br>historical treasures, or other similar assets held for public exhibition, education, or research in fu<br>following amounts relating to these items:  | stement and balance sheet works of art,<br>urtherance of public service, provide the |
|       | (i) Revenues included in Form 990, Part VIII, line 1  | ▶ \$   |
|       | (II) Assets included in Form 990, Part X  | <b>&gt;</b> \$   |
| 2     | 2 If the organization received or held works of art, historical treasures, or other similar assets for f<br>amounts required to be reported under SFAS 116 (ASC 958) relating to these items.   |  |
|       | a Revenues included in Form 990, Part VIII, line 1  | ▶ \$   |
|       | b Assets included in Form 990, Part X   |  |
|       |   |  |

| Partill Organizations Mainta   | ining Collection                    |                                       | rical Traceurae or              | Other Similar Acc            |                       |
|--|-------------------------------------|---------------------------------------|---------------------------------|------------------------------|-----------------------|
|  |                                     |                                       |                                 |                              |                       |
| 3 Using the organization's acquisition items (check all that apply)        | n, accession, and oth               | _                                     |                                 | re a significant use of it   | s collection          |
| a Public exhibition  |                                     | d Loan o                              | or exchange programs            |                              |                       |
| <b>b</b> Scholarly research  |                                     | e U Other                             |                                 |                              |                       |
| c Preservation for future genera   |                                     |                                       |                                 |                              |                       |
| <ol> <li>Provide a description of the organi<br/>Part XIII.</li> </ol>     |                                     |                                       |                                 |                              |                       |
| 5 During the year, did the organizati to be sold to raise funds rather tha | in to be maintained as              | s part of the organi                  | ization's collection?           |                              |                       |
| Escrow and Custodia line 9, or reported an a                               | al Arrangements<br>Imount on Form 9 | . Complete if th<br>190, Part X, line | ne organization ansv<br>e 21.   | vered 'Yes' to Form          | 990, Part IV,         |
| 1 a Is the organization an agent, truste<br>on Form 990, Part X?           | ee, custodian, or othe              | r intermediary for o                  | contributions or other asse     | ets not included             | Yes No                |
| b If 'Yes,' explain the arrangement in                                     |                                     |                                       |                                 |                              |                       |
| z w ves, explain ale allangement i   | Transfer de la compre               | are renewing to                       | 5.6.                            |                              | Amount                |
| c Beginning balance  |                                     |                                       |                                 | . 1c                         | 7 ti Flourit          |
| d Additions during the year  |                                     |                                       |                                 |                              |                       |
| e Distributions during the year  |                                     |                                       |                                 |                              | <del> </del>          |
| f Ending balance   |                                     |                                       |                                 |                              |                       |
| 2 a Did the organization include an an                                     |                                     |                                       |                                 | <u> </u>                     |                       |
| b If 'Yes,' explain the arrangement in                                     |                                     |                                       |                                 |                              |                       |
| Pärt Va Endowment Funds. C   | Complete if the or                  | ganization ans                        | wered 'Yes' to Form             | 990, Part IV, line 1         | 0.                    |
|  | (a) Current year                    | (b) Prior year                        |                                 | (d) Three years back         | (e) Four years back   |
| 1 a Beginning of year balance  |                                     |                                       | ,,,,                            | 1 ,                          | 1                     |
| <b>b</b> Contributions   |                                     |                                       |                                 |                              |                       |
| c Net investment earnings, gains, and losses                               |                                     |                                       |                                 |                              |                       |
| d Grants or scholarships   |                                     |                                       |                                 |                              |                       |
| e Other expenditures for facilities and programs                           |                                     |                                       |                                 |                              |                       |
| f Administrative expenses  |                                     |                                       |                                 |                              |                       |
| g End of year balance  |                                     |                                       |                                 |                              | <del></del>           |
| 2 Provide the estimated percentage   | of the current year er              | nd balance (line 1                    | r column (a)) held as:          | <b>!</b>                     | <u> </u>              |
| a Board designated or quasi-endow  | •                                   | %                                     | , column (a)) neld as.          |                              |                       |
| b Permanent endowment  | - <del></del>                       |                                       |                                 |                              |                       |
|  |                                     | <b>a</b> .                            |                                 |                              |                       |
| c Temporarily restricted endowment   |                                     |                                       |                                 |                              |                       |
| The percentages in lines 2a, 2b, a   | no 2c snoulo equal 10               | JU%.                                  |                                 |                              |                       |
| 3 a Are there endowment funds not in<br>organization by:                   | the possession of the               | organization that                     | are held and administere        | d for the                    | Yes No                |
| (i) unrelated organizations  |                                     |                                       |                                 |                              | . 3a(I)               |
| (ii) related organizations   |                                     |                                       |                                 |                              | · 3a(ii)              |
| <b>b</b> If 'Yes' to 3a(II), are the related org                           |                                     | -                                     |                                 |                              | . 3b                  |
| 4 Describe in Part XIII the intended                                       | uses of the organizati              | on's endowment fo                     | unds                            |                              |                       |
| Part VI Land, Buildings, and Complete if the organization                  |                                     | Yes' to Form 9                        | 990, Part IV, line 11a          | . See Form 990, Pa           | art X, line 10.       |
| Description of property  | (a) Cos                             | st or other basis nvestment)          | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value        |
| 1a Land  |                                     |                                       | 222.0 (32.01)                   |                              |                       |
| b Buildings  | · · · · · ·                         |                                       |                                 |                              |                       |
| c Leasehold improvements   | -                                   |                                       | 2 000                           | A E 1.                       | 1 600                 |
| d Equipment  |                                     |                                       | 2,080.                          | 451.                         | 1,629.                |
| - · ·  |                                     |                                       | 51,318.                         | 45,632.                      | 5,686.                |
| e Other  |                                     | <u> </u>                              | (D) () (2(1))                   |                              | •                     |
| Total. Add lines 1a through 1e. (Column                                    | n (a) must equal Form               | 990, Part X, colui                    | mn (B), line 10(c).)            |                              | 7,315.                |
| BAA  |                                     |                                       |                                 | Sched                        | ule D (Form 990) 2013 |

| Schedule D (Form 990) 2013 COLLECTIVE FOR YOU  | <u> </u>                 | 27-4577729  | Page 3  |
|--|--------------------------|---|---------|
| Part VII Investments — Other Securities.  Complete if the organization answered 'Y   | es' to Form 990, I       | Part IV, line 11b. See Form 990, Part X, line 12.                         |         |
| (a) Description of security or category (including name of security)   | (b) Book value           | (c) Method of valuation: Cost or end-of-year market value                 |         |
| (1) Financial derivatives  |                          |   |         |
| (2) Closely-held equity interests  |                          |   |         |
| (3) Other  |                          |   |         |
| (A)  |                          |   |         |
| (B)  |                          |   |         |
| (C)  |                          |   |         |
| (D)  |                          | <u> </u>  |         |
| (E)  |                          | <u></u>   |         |
| (F)  |                          |   |         |
| (G)<br>(H)   |                          |   |         |
| (1)  | <del></del>              |   |         |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12) . ▶  |                          |   | -       |
| Part VIII Investments - Program Related.   |                          |   |         |
| Complete if the organization answered 'Y   |                          | Part IV, line 11c. See Form 990, Part X, line 13.                         |         |
| (a) Description of investment type   | (b) Book value           | (c) Method of valuation: Cost or end-of-year market va                    | alue    |
| _ (1)  |                          |   |         |
| (2)  |                          |   |         |
| (3)  | <del> </del>             |   |         |
| (4)  |                          |   |         |
| (5)  | <del></del>              |   | _       |
| <u>(6)</u><br>(7)  |                          | · · · · · · · · · · · · · · · · · · ·                                     |         |
| (8)  |                          | · · · · · · · · · · · · · · · · · · ·                                     |         |
| (9)  |                          |   |         |
| (10)   |                          |   |         |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  |                          |   |         |
| Part X Other Assets.   |                          |   |         |
| Complete if the organization answered Y (a) Des  |                          | Part IV, line 11d. See Form 990, Part X, line 15.                         |         |
| (1)  | Сприон                   | (b) Book Vali   | ue      |
| (2)  |                          |   |         |
| (3)  |                          |   |         |
| (4)  |                          |   |         |
| (5)  |                          |   |         |
| (6)  |                          |   |         |
| <u>(7)</u><br>(8)  |                          |   |         |
| (9)  |                          |   |         |
| (10)   |                          |   |         |
| Total. (Column (b) must equal Form 990, Part X, column (B), lin  | ne 15.)                  |   |         |
| Part X Other Liabilities.  | •                        |   |         |
| Complete if the organization answered 'Yes' to Fo  |                          |   |         |
| (a) Description of liability   | (b) Book value           |   |         |
| (1) Federal income taxes   |                          | <del> </del>  |         |
| (2)  |                          | <del> </del>  |         |
| (4)  |                          | <del> </del> :  | :       |
| (5)  |                          | · ·   |         |
| (6)  |                          |   |         |
|  |                          |   |         |
| (8)  |                          | <u> </u>  |         |
| (9)  |                          | <del> </del>  |         |
| (10)   |                          | <del> </del>  |         |
| (11)   |                          | <del> </del>  |         |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25)  | oto to the empelants for | panelal statements that conside the associantic to lightiff for your fall |         |
| <ol><li>Liability for uncertain tax positions In Part XIII, provide the text of the footnet<br/>tax positions under FIN 48 (ASC 740). Check here if the text of the footnote had</li></ol> |                          |   | $\Box$  |
| BAA  | TEEA3303 10/02/13        | Schedule D (Form 990  | 0) 2012 |
|  |                          |   | -, 10   |

| Schedule D (Form 990) 2013 COLLECTIVE FOR YOUTH   | <u>27-4577729</u>                   | Page 4       |
|---|-------------------------------------|--------------|
| Reconciliation of Revenue per Audited Financial Statements With Revenue per   | er Return.                          |              |
| Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.   |                                     |              |
| 1 Total revenue, gains, and other support per audited financial statements  | 1                                   | 1,349,198.   |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:   |                                     |              |
| a Net unrealized gains on investments   | 107.                                |              |
| b Donated services and use of facilities  |                                     |              |
| c Recovenes of prior year grants  |                                     |              |
| d Other (Describe in Part XIII.)  |                                     |              |
| e Add lines 2a through 2d   | 2 e                                 | 33,407.      |
| 3 Subtract line 2e from line 1  | 3                                   | 1,315,791.   |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:  |                                     |              |
| a Investment expenses not included on Form 990, Part VIII, line 7b 4a   |                                     |              |
| b Other (Describe in Part XIII.)  |                                     |              |
| c Add lines 4a and 4b   | 4 c                                 |              |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)   | 5                                   | 1,315,791.   |
| PartiXIII Reconciliation of Expenses per Audited Financial Statements With Expenses   |                                     | 73207.32.    |
| Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.   | •                                   |              |
| 1 Total expenses and losses per audited financial statements  | 1                                   | 801,026.     |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25  |                                     | 7 7          |
| a Donated services and use of facilities  |                                     |              |
| b Prior year adjustments  |                                     |              |
| c Other losses  |                                     |              |
| d Other (Describe in Part XIII.)  |                                     |              |
| e Add lines 2a through 2d   | 2 e                                 |              |
| 3 Subtract line 2e from line 1  | <del></del>                         | 1,801,026.   |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  |                                     | 700170101    |
| a Investment expenses not included on Form 990, Part VIII, line 7b  |                                     |              |
| ь Other (Describe in Part XIII )  |                                     |              |
| c Add lines 4a and 4b   |                                     |              |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  | <b>5</b>   1                        | ,801,026.    |
| RartiXIII Supplemental Information.   |                                     |              |
| Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any action of the part XII, lines 2d and 4b. | ,<br>iditional information          |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
|   |                                     |              |
| BAA   | Schedule D (F                       | om 990) 2013 |
|   | · · · · · · · · · · · · · · · · · · |              |

| Schedule D | (Form 990) 2013 | COLLECTIVE FOR YOUTH                         | 27-4577729 | Page 5  |
|------------|-----------------|--|------------|---------|
| Part XIII  | Supplemental    | COLLECTIVE FOR YOUTH Information (continued) |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            | <b></b> |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            | <b></b> |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |
| <b></b>    |                 |  |            |         |
|            |                 |  |            |         |
|            |                 |  |            |         |

BAA

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

COLLECTIVE FOR YOUTH
Rantila General Information on Grants and Assistance

OMB No 1545-0047

2013

Information about Schedule I (Form 990) and Its Instructions is at www.irs.gov/form990. Complete If the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open() Insp

**Employer identification numbe** 27-4577729 **%** □

| the selection criteria used to award the grants or assistance? | Partill Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. | the address of organization (b) EIN (c) IRC section (d) Amount of cash grant (e) Amount of non-cash (f) Method of valuation (g) Description of (h) Pun assistance (hook EMV anneasa) |
|--|--|--|
| the selection criteria used to award the grants or assistance? | Part∷ll≰  Grants and Other Ass<br>Form 990, Part IV, line  | 1 (a) Name and address of organization   |

| to the control of the | any technicus                                   |  |                          | מנו מכ מלשומנים                   | Pando inicoloria i  |  |                                    |
|--|---|--|--------------------------|-----------------------------------|---|--|------------------------------------|
| 1 (a) Name and address of organization or government   | (b) EIN   | (c) IRC section<br>if applicable           | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) BOYS & GIRLS CLUB MIDLAND - 2610 HAMILLYON ST  | 47-0467350                                      | 501 (C) 3                                  | 143,203.                 |                                   |   |  | AFTERSCHOOL PR                     |
| <u>AVE</u>   | 27-5111197                                      | 501(C)3                                    | 172,476.                 |                                   |   |  | AFTERSCHOOL PR                     |
| CENTER   | 20-4820776                                      | 501 (C) 3                                  | .067,490.                | 5                                 |   |  |                                    |
| (4) D.R.E.A.M  | 84-1717281                                      | 501 (C) 3                                  | 239, 393.                | ,                                 |   |  | AFTERSCHOOL PR                     |
| YREET  | 47-0845085                                      | 501 (C) 3                                  | 108,343.                 |                                   |   |  | AFTERSCHOOL PR                     |
| OBLY 200 -<br>REET   | 47-0469782                                      | 501 (C) 3                                  | 125,075.                 |                                   |   |  | AFTERSCHOOL PR                     |
| F. <u>NE.</u>  | 47-0384575                                      | 501(C)3                                    | 135,124.                 |                                   |   |  | AFTERSCHOOL PR                     |
| (8) YMCA_OF_GREATER_OMAHA430_ S_20IH_SIREETOMAHA_NE_68102  | 47-0376586                                      | 501 (C) 3                                  | 23,374.                  |                                   |   |  | AFTERSCHOOL PR                     |
| <ul> <li>Enter total number of section 501(c)(3) and government organization</li> <li>Enter total number of other organizations listed in the line 1 table</li> </ul>  | and government orga<br>s listed in the line 1 t | inizations listed in the line 1 table able | line 1 table             |                                   |   |  | 8 0                                |
| BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.   | , see the Instruction                           | s for Form 990.                            |                          | TEEA3901 (                        | 07/12/13  | Schedu                                 | Schedule I (Form 990) (2013)       |

Page 2 COMPARED TO BUDGETS BEFORE PAYMENT. GRANTEES ARE REQUIRED TO SUBMIT A REPORT ON THE USE OF FUNDS. (f) Description of non-cash assistance Schedule I (Form 990) (2013) COLLECTIVE FOR YOUTH (Parties) Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. BUDGETS ARE PREPARED FOR ALL GRANTS. THE EXECUTIVE DIRECTOR APPROVES ALL EXPENSES WHICH ARE Parily Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2013) Pt\_I\_Line\_2 Pt\_I\_Line\_2 ₽¥

SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2013

Open(of/tiblic Inspection

Department of the Treasury Internal Revenue Service ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer Identification number 27-4577729 COLLECTIVE FOR YOUTH Pt XII, Line 1 COLLECTIVE FOR YOUTH CHANGED ITS ACCOUNTING METHOD FROM Pt XII, Line 1 CASH TO ACCRUAL AT JANUARY 1, 2014. LINE 9 - ADJUSTMENT TO BEGINNING NET ASSETS RESULTING FROM CHANGE IN ACCOUNTING METHOD. Pt VI, Line 11b THE 990 FORM WILL BE GIVEN TO THE EXECUTIVE COMMITTEE FOR REVIEW Pt VI, Line 11b AND APPROVAL BEFORE SUBMITTING THE REPORT. 990 WILL ALSO BE Pt VI, Line 11b SHARED WITH THE ENTIRE BOARD. Pt VI, Line 12c IT IS STATED IN THE CONFLICT OF INTEREST POLICY THAT THE BOARD Pt VI, Line 12c MUST DISCLOSRE ANNUALLY ANY INTERESTS THAT COULD GIVE RISE TO CONFLICTS. Pt VI, Line 12c AT THIS TIME, IT IS NOT A FORMAL WRITTEN PROCESS. Pt VI, Line 19 DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

# Form **3115**

# **Application for Change in Accounting Method**

Application for change in Accounting metrica

OMB No. 1545-0152

| Internal Revenue Service  |  |  |  |   |                          |                  |              |
|---|--|--|--|---|--------------------------|------------------|--------------|
| Name of filer (name of parent corpora   | tion if a consolidate  | d group) (see instructions)  | Identification number (see instructions)   |   |                          |                  |              |
|   |  |  | 27-4577729   |   |                          |                  |              |
|   |  |  | Principal business activity code number (see instr   | ructions)                                 |                          |                  |              |
| COLLECTIVE FOR YO   | אינונו   |  |  |   |                          |                  |              |
| Number, street, and room or suite no  |  | he instructions  | Tax year of change begins (MM/DD/YYYY)   | 01/01/20                                  | 11.4                     |                  |              |
| 105 N 210T AUTHIL   | 7  | 103  | Tax year of change ends (MM/DD/YYYY)   | 06/30/20                                  | <del></del>              | <del>-</del> -   | <del>-</del> |
| 105 N 31ST AVENUE   | <u>-</u>   | 103  | Name of contact person (see instructions)  | 06/30/20                                  | 114                      |                  |              |
| OMALIA  |  | NE 68131   |  |   |                          |                  |              |
| OMAHA  Name of applicant(s) (if different than  | filer) and identificat   |  | Ico  | ontact person's telep                     | hone number              |                  |              |
|   | •  | ,  |  |   |                          |                  |              |
|   |  |  |  |   |                          | $\top$           |              |
|   |  |  | ned (see instructions for when Form 28   |   |                          |                  |              |
| •   | •  | -  | ned (see instructions for when Form 26   |   |                          | $\Box$           |              |
| Check the box to indicate   | · · · <u>· · · · · · · · · · · · · · · · </u>                          |  | Check the appropriate box to indic   |   |                          | _ <del></del> _  |              |
| the applicant.  |  | Cooperative (Section 1381)   | method change being requested. (   | • • •                                     |                          | 9                |              |
| Individual  | -  | Partnership  | }  |   | ·                        |                  |              |
| Corporation   |  | S corporation  | Depreciation or Amortization   |   |                          |                  |              |
| <b>—</b> '  | )  | · ·  | Financial Products and/or Finan  | noial Activities                          | of                       |                  |              |
| Controlled foreign corporation (S   | · ·  | Insurance company (Section 816(a))   | <del>     </del>   | iciai Activities (                        | JI                       |                  |              |
| 10/50 corporation (Section 904(c  | · · · · · · · · · · · · · · · · · · ·                                  | Insurance company (Section 831)  | Financial Institutions   |   |                          |                  |              |
| Qualified personal service corporation (Section 448   | ce<br>3(d)(2))   | Other (specify)  | Other (specify) •  |   |                          |                  |              |
|   |  |  |  | . <b>_</b>                                |                          | . — <del>–</del> |              |
|   |  | on ► 501(c)3 corp  | <u> </u>   |   |                          |                  |              |
| to the taxpayer or to the taxp<br>(including its instructions), a<br>The taxpayer must attach | approval of the<br>payer's reques<br>s well as any o<br>all applicable | requested change in method of actedited change in method of accountinated the information that is not specification that is not specification. | ccounting, the taxpayer must provide a<br>ng This includes all information reques<br>cally requested.<br>ested throughout this form. | il information ti<br>sted on this For     | nat is reievai<br>m 3115 | าช               |              |
|   |  | natic Change Request   |  |   |                          | Yes              | No           |
| ACC 2 - 4   |  | <del></del>  | number for the requested automatic cl  | hange Enter o                             | <del></del>              |                  | E 37         |
| one designated autom<br>requested change has  | natic accounting<br>s no designated                                    | g method change number, except<br>d automatic accounting method ch   | as provided for in guidance published lange number, check 'Other,' and provie automatic change. See instructions.                    | by the IRS. If the lide both a            |                          |                  |              |
| (a) Change No.  | •  | ·  | ~  |   |                          |                  |              |
|   |  | ` '         ' '  | 2008-52 cause automatic consent to be  | e unavailable fo                          | or S                     |                  |              |
| the applicant's reques  | ted change? If   | 'Yes,' attach an explanation   |  |   |                          |                  | Х            |
|   |  | rt IV, and also Schedules A throug   | th E of this form (if applicable).   |   | £                        | AL AM            |              |
| Rart II Information   | for All Red  | quests   |  |   |                          | Yes              | No           |
|   |  | gage in the trade or business to what (see instructions)?  | nich the requested change relates, or to   | erminate its                              |                          | 1000             | X            |
| If 'Yes,' the applicant i   | s not eligible to  | make the change under automat  | ic change request procedures.  |   |                          |                  | 731          |
| tax year(s)) have any   | any present o<br>Federal incom   | r former consolidated group in whe<br>e tax return(s) under examination  | ich the applicant was a member during (see instructions)?  | the applicable                            | ,<br><u>[</u>            |                  | X            |
|   |  |  | ssue (with respect to either the applica   |   | ent (3                   |                  | · ·          |
| or former consolidated consideration or (ii) plant  | d group in whic<br>aced in susper                                      | in the applicant was a member duities (see instructions)?  | ring the applicable tax year(s)) either (i   | ) under                                   |                          | 24. Car          | Bullie I     |
|   |  | Signature (s   | on instructions)   |   |                          |                  |              |
| Under penalties of perjury, I declar  | e that I have exam   | lined this application, including accompan   | ee moundlons)  ying schedules and statements, and, to the bes Declaration of preparer (other than applicant) is                      | it of my knowledge<br>based on all infort | and belief, the          | applic<br>prepa  | ation        |
| has any knowledge.  | <b>~</b>   | ,  |  |   |                          |                  |              |
| My a  | Piler  |  | Preparer (other the  | Tan mer/appiid                            | ant)                     |                  |              |
|   | Signature and d  | late   | Signature of individual preparations   | aring the application                     | on and date              |                  |              |
| MEGAN ADDISON Na  | ime and title (print   | or type) - EXECUTIVE DIRECTOR  | PAUL E. HAMILTON Name of Individual preparing  | the application (p                        | orint or type)           |                  |              |
|   |  |  | HAMILTON ASSOCIATES P.   | .c.                                       |                          |                  |              |
|   |  |  | 20 PEARL ST  |   |                          |                  |              |
|   |  |  | COUNCIL BLUFFS Name of firm preparent  | I A                                       |                          | <del>-</del>     |              |

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

|      |   |             | ECTIVE FOR YOU   |           |  | 27-4577729                          | Р                       | age 2    |
|------|---|-------------|--|-----------|--|-------------------------------------|-------------------------|----------|
| ar   | Il Information Fo   | r-/         | All Requests (contin                                   | )Ué       | ed)  |                                     | Yes                     | No       |
| ·4 c | present or former consolida   | ate         | ed group in which the ap                               | lo:       | to change an issue pending (with respect to either the cant was a member during the applicable tax year(s)   | for any tax vear                    | 2                       | C. 7     |
| c    | I is the request to change the director consent to the filing                           | e i<br>g c  | method of accounting bot the request (see instru       | ein       | g filed under the procedures requiring that the operations)?   | ing division                        |                         | Čest     |
|      | If 'Yes,' attach the consent  |             |  |           |  |                                     | 5.3                     | 3        |
| e    | Is the request to change th   | e i         | method of accounting be                                | ein       | g filed under the 90-day or 120-day window period?   |                                     |                         |          |
|      | If 'Yes,' check the box for the   | he          | applicable window peri-                                | od        | and attach the required statement (see instructions).  |                                     | 7 12                    | 3.31     |
|      | 90 day  |             | 120 day Date exa                                       | m         | ination ended ►  |                                     | 1                       |          |
| f    | If you answered 'Yes' to line 4a,   | ent         | er the name and telephone r                            | nun       | nber of the examining agent and the tax year(s) under examination  | n                                   | 200                     |          |
|      | Name •  |             |  |           | Telephone number ► Tax yea   | ır(s) ►                             |                         |          |
| g    | Has a copy of this Form 31  | 15          | been provided to the e                                 | ха        | mining agent identified on line 4f?  |                                     |                         |          |
| 5 a  | Does the applicant (or any tax year(s)) have any Fede                                   | pr<br>ra    | esent or former consolic<br>l income tax return(s) be  | dat       | ed group in which the applicant was a member during ore Appeals and/or a Federal court?  | the applicable                      |                         | x        |
|      | If 'Yes,' enter the name of t   | he          | (check the box)  |           | Appeals officer and/or counsel for the government  | vernment, and the tax               | (द्र <sup>ामभ</sup> ्रा | N- 1     |
|      | year(s) before Appeals and  | l/o         | r a Federal court.                                     |           |  |                                     |                         |          |
|      | Name -  |             |  | _         | Telephone number ► Tax yea   |                                     | 3                       | 1        |
|      |   |             |  |           | peals officer and/or counsel for the government identif  |                                     |                         |          |
| C    | court (for either the applica   | nt          | or any present or forme                                | rc        | to change an issue under consideration by Appeals a consolidated group in which the applicant was a mem  | Ind/or a Federal<br>ber for the tax | 14. Tell                |          |
|      | If 'Yes', attach an explanati   | on          | ı <b>.</b>   |           |  |                                     | 185- 37                 | 1 . 7    |
| 6    | statement that provides ea  | ch          | parent corporation's (a)                               | n         | respect to any present or former consolidated group,<br>ame, (b) identification number, (c) address, and (d) to<br>nation, before an Appeals office, and/or before a Fede  | ax vear(s) during                   |                         |          |
| 7    | partnership or an S corpora   | atio<br>App | on, is it requesting a cha<br>peals, or before a Feder | ing<br>al | er an entity (including a limited liability company) trea<br>ge from a method of accounting that is an issue under<br>court, with respect to a Federal income tax return of a  | consideration                       |                         |          |
|      | If 'Yes,' the applicant is not  | t el        | ligible to make the chan                               | ge        | ı <b>.</b>   |                                     | X SERVS                 | 2/12     |
| 8 a  | Does the applicable revenu  | ie<br>d c   | procedure (advance con<br>hange (see instructions      | ns<br>)?  | ent or automatic consent) state that the applicant doe   |                                     | F                       | X        |
| t    | If 'Yes,' attach an explanati   | on          | l <b>.</b>   |           |  |                                     | 10-17 3                 | 777      |
| 9 a  | procedure requiring advance   | се          | consent) a change in m                                 | et        | quested or made (under either an automatic change thod of accounting within the past 5 years (including the control of the con | procedure or a                      |                         | X        |
| t    |   |             |  |           | of each requested change in method of accounting applicant received consent.   |                                     | 7000                    |          |
| c    | If any application was without taxpayer but was not signe change, attach an explanation | d a         | and returned to the IRS,                               | eni<br>O  | ed, or if a Consent Agreement granting a change was<br>r if the change was not made or not made in the requ  | s sent to the ested year of         | 4                       |          |
| IO a | Does the applicant, its prec<br>request) for a private letter                           | ded<br>ru   | cessor, or a related part<br>ling, change in method    | y o       | currently have pending any request (including any cor<br>accounting, or technical advice?  | currently filed                     | 1000                    | X        |
| t    | If 'Yes,' for each request at request (private letter ruling                            | tac<br>g, c | ch a statement providing<br>change in method of ac     | g ti      | ne name(s) of the taxpayer, identification number(s), tunting, or technical advice), and the specific issue(s)   | he type of<br>n the request(s)      | 12 12 12 1              | <b>赛</b> |
| 11   | Is the applicant requesting   | to          | change its overall meth                                | 10        | d of accounting?   |                                     | Х                       |          |
|      | If 'Yes,' check the appropris   | ate<br>ag   | e boxes below to indicat<br>e 4 of this form           | è t       | he applicant's present and proposed methods of acco  | ounting. Also,                      | 45.75                   |          |
|      | Present method:   | X           | Cash   | Г         | Accrual Hybrid (attach descript  | tion)                               | 3                       | <i>5</i> |
|      | Proposed method:  |             | Cash   | X         | Accrual Hybrid (attach descript  | -                                   | . î.}                   | 1. 2.    |

| - 10                       | Tall information For All Requests  | Continued)   |  |   |                        | Yes     | No   |
|----------------------------|--|--|--|---|------------------------|---------|--|
| 12                         | If the applicant is either (i) <b>not</b> changing its ove<br>and also changing to a special method of acco<br>each of the following:  | rall method of accounting, outling for one or more items   | or (ii) is changin<br>s, attach a deta   | ng its overall method of accoun<br>iled and complete description f  | iting<br>for           |         |  |
| а                          | The item(s) being changed.   |  |  |   |                        | n.      |  |
| b                          | The applicant's present method for the item(s)   | being changed.   |  |   |                        |         |  |
| c                          | The applicant's proposed method for the item(  | s) being changed   |  |   |                        |         |  |
| d                          | The applicant's present overall method of acco   | unting (cash, accrual, or hyl  | brid)  |   |                        |         |  |
|                            | Attach a detailed and complete description of to for each. If the applicant has more than one traeach trade or business is accounted for separatypes of activities engaged in that generate growhich trade or business is requesting to change the service of the ser   | de or business as defined in<br>tely, the goods and services<br>ss income, the overall meth<br>e its accounting method as  | n Regulations s<br>s provided by e<br>nod of accountir<br>part of this app   | ection 1 446-1(d), describe: where we have trade or business and any and for each trade or business; a lication or a separate application.  | hether<br>other<br>and |         |  |
| 14                         | Will the proposed method of accounting be use For insurance companies, see the instructions  |  |  |   |                        | Х       |  |
|                            | If 'No,' attach an explanation.  |  |  |   |                        |         |  |
| 15 a                       | Has the applicant engaged, or will it engage, ir or liquidation) during the proposed tax year of section 381(b)(1)?  | change determined without i  | regard to any p  | otential closing of the year und  | ler                    | 1 0 1 0 |  |
| b                          | If 'Yes,' for the items of income and expense the  |  |  |   | • • • • • • •          |         | X  |
|                            | methods of accounting used by the parties to the transfer and the method(s) that would be requitive application.   | ne section 381(a) transaction<br>red by section 381(c)(4) or (   | n immediately l<br>(c)(5) absent co  | before the date of distribution on<br>insent to the change(s) request   | ted in                 |         |  |
| 16                         | Does the applicant request a conference with t   | he IRS National Office if the  | RS proposes  | an adverse response?  |                        | -       | X  |
| 17                         | If the applicant is changing to either the overall accounting for any property subject to section to section 474, enter the applicant's gross rece   | 263A, any long-term contrac  | ct subject to sec  | tion 460, or inventories subjec   | et                     |         |  |
|                            | 1st preceding year ended mo 12 yr 2013 y   | nd preceding<br>ear ended mo 12  | yr 2012  | 3rd preceding year ended. mo 12   | yr 2011                |         | description.   |
|                            |  |  | 7. 2012  |   | ,                      |         |  |
| 953.5                      | \$ 4,493,652.  | 1,220,225.   | ,- <u>2012</u>   | \$ 591,488.   | , 2011                 |         |  |
| - 1114                     | \$ 4,493,652. \$<br>ft*IIIg Information For Advance Con  | 1,220,225.<br>sent Request   |  | \$ 591,488.   |                        | Yes     | No   |
| - 1114                     | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described   | 1,220,225. sent Request n any revenue procedure, r   | revenue ruling,  | \$ 591,488.   |                        | Yes     | No   |
| - 1114                     | \$ 4,493,652. \$<br>ft*IIIg Information For Advance Con  | 1,220,225. sent Request in any revenue procedure, r  | revenue ruling,  | \$ 591,488.   |                        | Yes     | No   |
| 18                         | \$ 4,493,652. \$  Information For Advance Con Is the applicant's requested change described guidance as an automatic change request?  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explaned complete description of the facts that explaned complete that the applicant is authorized to published rulings, court cases, etc.) supporting authorities or a statement that no contrary authorities   | 1,220,225.  sent Request  In any revenue procedure, represent is submitting its submitting its protection how the law specifically to use the proposed method the proposed method also ority exists  | revenue ruling,  | notice, regulation, or other pub- advance consent eing changed Include a detaile applicant's situation and that hority (statutes, regulations,  | olished                | Yes     | No   |
| 18                         | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request? .  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation | 1,220,225.  sent Request in any revenue procedure, represent the applicant is submitting its submitting its proposed method in the proposed method the proposed method the proposed method also ority exists roposed change (see instructions).  | revenue ruling,  | notice, regulation, or other pub- advance consent eing changed Include a detaile applicant's situation and that hority (statutes, regulations,  | olished                | Yes     | No Marie Mar |
| 18                         | \$ 4,493,652. \$  Information For Advance Con Is the applicant's requested change described guidance as an automatic change request?  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explaned complete description of the facts that explaned complete that the applicant is authorized to published rulings, court cases, etc.) supporting authorities or a statement that no contrary authorities   | 1,220,225.  sent Request in any revenue procedure, represent the applicant is submitting its submitting its proposed method in the proposed method the proposed method the proposed method also ority exists roposed change (see instructions).  | revenue ruling,  | notice, regulation, or other pub- advance consent eing changed Include a detaile applicant's situation and that hority (statutes, regulations,  | olished                | Yes     | No   |
| 18<br>19<br>20<br>21       | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request? .  If Yes, attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation demonstrates that the applicant is authorized trulings, court cases, etc.) supporting authorities or a statement that no contrary authorities or a statement that no contrary authorities are assumed to the position of the applicant is a member of a consolidated use the proposed method of accounting for the  | 1,220,225.  sent Request in any revenue procedure, represent in any revenue procedure, represent in any revenue procedure, represent in any revenue proposed method in a proposed method the proposed method the proposed method also proposed change (see instructor the proposed change.   | revenue ruling,  | s 591,488.  notice, regulation, or other public advance consent eight changed include a detaile applicant's situation and that hority (statutes, regulations, a discussion of the contrary  | olished<br>            | Yes     | No   |
| 18<br>19<br>20<br>21<br>22 | \$ 4,493,652. \$  Information For Advance Con Is the applicant's requested change described guidance as an automatic change request? .  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation  | 1,220,225.  sent Request  In any revenue procedure, represent its submitting its submitting its proposed method in the proposed method the proposed method the proposed method in the proposed method its proposed change (see instruction the proposed change.  The proposed change item being changed?   | revenue ruling, s request under d for the item be applies to the Include all aut o, include either ctions)   | s 591,488.  notice, regulation, or other public advance consent eight changed include a detaile applicant's situation and that hority (statutes, regulations, a discussion of the contrary  | olished<br>            | Yes     | No   |
| 18 19 20 21 22             | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request?  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement of the applicant's reasons for the applicant is a member of a consolidated suse the proposed method of accounting for the lift'No', attach an explanation.   | 1,220,225.  sent Request  In any revenue procedure, represent in any revenue procedure, represent in any revenue procedure, represent in any revenue proposed method in a submitting its represent in a submitting its representation in a submitted i | revenue ruling, s request under d for the item be applies to the include all aut o, include either ctions) e, do all other m   | notice, regulation, or other publication and that hority (statutes, regulations, a discussion of the contrary   | olished<br>            | Yes     | No   |
| 18 19 20 21 22 23 a        | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request?  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement of the applicant's reasons for the applicant is a member of a consolidated use the proposed method of accounting for the lif 'No', attach an explanation.  Enter the amount of user fee attached to this all fithe applicant qualifies for a reduced user fee  | 1,220,225.  sent Request  In any revenue procedure, represent in any revenue procedure, represent in any revenue procedure, represent in any revenue proposed method in a submitting its represent in a submitting its representation in a submitted i | revenue ruling, s request under d for the item be applies to the include all aut o, include either ctions) e, do all other m   | notice, regulation, or other publication and that hority (statutes, regulations, a discussion of the contrary   | olished<br>            |         |  |
| 18 19 20 21 22 23 a        | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request?  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement of the applicant's reasons for the applicant is a member of a consolidated suse the proposed method of accounting for the lift'No', attach an explanation.   | 1,220,225.  sent Request  In any revenue procedure, represent in any revenue procedure, represent in any revenue procedure, represent in any revenue proposed method in a submitting its represent in a submitting its representation in a submitted i | revenue ruling, s request under d for the item be applies to the include all aut o, include either ctions) e, do all other m   | notice, regulation, or other publication and that hority (statutes, regulations, a discussion of the contrary   | olished<br>            | Yes     | No   |
| 18 19 20 21 22 23 a        | Information For Advance Con Is the applicant is requested change described guidance as an automatic change request?  If Yes, attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation complete description of the facts that explanation authorities that the applicant is authorized to published rulings, court cases, etc.) supporting authorities or a statement that no contrary authorities or a statement that no contrary authorities are as a statement of the applicant's reasons for the applicant is a member of a consolidated use the proposed method of accounting for the If 'No', attach an explanation.  Enter the amount of user fee attached to this are if the applicant qualifies for a reduced user fee the Section 481(a) Adjustment  Does the applicable revenue procedure, revenimplement the requested change in method of   | 1,220,225.  sent Request in any revenue procedure, recommendation and the proposed method also ority exists roposed change (see instructions) from the proposed change.  group for the year of change item being changed?  application (see instructions) attach the required information accounting on a cut-off basic  | revenue ruling, s request under d for the item be applies to the Include all aut o, include either ctions) a, do all other m    \$ ation or certificate or other publis  | notice, regulation, or other publication (see instructions).  | olished                |         |  |
| 18 19 20 21 22 23 a b 3P,a | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request?  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suppand complete description of the facts that explanation authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement of the applicant's reasons for the facts that explanation are the proposed method of accounting for the facts that explanation.  If the applicant is a member of a consolidated use the proposed method of accounting for the facts of the applicant qualifies for a reduced user fee the explicant qualifies for a reduced user fee the explicant qualifies for a reduced user fee the explicant that the explicant explanation.  Does the applicable revenue procedure, revenue implement the requested change in method of If 'Yes,' do not complete lines 25, 26, and 27 because of the explicant of the explicant explanation.  | 1,220,225.  sent Request  In any revenue procedure, reputation (see instructions) attach the required informatically and the proposed method the proposed method the proposed method the proposed method Also ority exists reposed change (see instructions) attach the required informatical method the proposed change.  In the proposed change (see instructions or the proposed change or the proposed method also or the proposed method also or the proposed method also or the proposed change or the proposed method also or the proposed change or the proposed method also or the proposed change or the pr | revenue ruling,  | notice, regulation, or other publication advance consent eight can structure applicant's situation and that hority (statutes, regulations, a discussion of the contrary embers of the consolidated gradient (see instructions).             | olished                | Yes     | No   |
| 18 19 20 21 22 23 a        | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request? .  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suprand complete description of the facts that explanation authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement of the applicant's reasons if the applicant is a member of a consolidated use the proposed method of accounting for the use the proposed method of accounting for the lifth applicant qualifies for a reduced user fee attached to this at the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the poli | 1,220,225.  sent Request In any revenue procedure, reporting the proposed method the proposed method the proposed method the proposed method the proposed delays roposed change (see instructor the proposed change.  group for the year of change item being changed?   | revenue ruling,  | notice, regulation, or other publication advance consent eight changed include a detaile applicant's situation and that hority (statutes, regulations, a discussion of the contrary embers of the consolidated grantion (see instructions). | olished<br>oup         | Yes     | No   |
| 18 19 20 21 22 23 a b 3P,a | \$ 4,493,652. \$  Information For Advance Con  Is the applicant's requested change described guidance as an automatic change request? .  If 'Yes,' attach an explanation describing why trequest procedures  Attach a full explanation of the legal basis suprand complete description of the facts that explanation authorities or a statement that no contrary authorities or a statement that no contrary authorities or a statement of the applicant's reasons if the applicant is a member of a consolidated use the proposed method of accounting for the use the proposed method of accounting for the lifth applicant qualifies for a reduced user fee attached to this at the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the applicant qualifies for a reduced user fee attached to the policies of the poli | 1,220,225.  sent Request in any revenue procedure, reputation show the law specifically to use the proposed method the proposed method the proposed method the proposed determined from the proposed change (see instruction or the proposed change.  The proposed change (see instruction or the proposed change item being changed?  The proposed change item being in the proposed change item being change item being ite   | revenue ruling, s request under d for the item be applies to the Include all aut o, include either ctions)  a, do all other m  b, or other publis is rather than a in increase (+) o on and an explay e component, so on the same ac | notice, regulation, or other publication (see instructions).  thed guidance require the application 481(a) adjustment?  and decrease (-) in anation of the computation for each polication, attach a list of the                            | olished<br>oup         | Yes     | No   |

BAA

|                            |  | <u> 577729                                   </u>  | 1                     |
|----------------------------|--|--|-----------------------|
| Pai                        | रि।ऐ.वे Section 481(a) Adjustment  |  | Ye                    |
| 26                         | If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?  |  |                       |
| 27                         | Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a conso group, a controlled group, or other related parties?   | lidated  |                       |
|                            | If 'Yes', attach an explanation.   |  | , ,,                  |
| Sch                        | nedule A — Change in Overall Method of Accounting (If Schedule A applies, Part I below must be comple  | ted \  |                       |
|                            |  |  |                       |
| Pai                        | thi Change in Overall Method (see instructions)  | <del></del>  |                       |
| 1                          | Enter the following amounts as of the close of the tax year preceding the year of change. If none, state 'None.' Also, atta providing a breakdown of the amounts entered on lines 1a through 1g.   | <del></del>  |                       |
|                            |  |  | ount                  |
| •                          | Income accrued but not received  | \$   | 367                   |
|                            | Income received or reported before it was earned (such as advanced payments) Attach a description of the income and the legal basis for the proposed method  |  |                       |
|                            | Expenses accrued but not paid (such as accounts payable)   |  | 322                   |
|                            | I Prepaid expenses previously deducted   |  | 7,                    |
|                            | Supplies on hand previously deducted and/or not previously reported  |  |                       |
|                            | Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II   |  |                       |
|                            | the section 481(a) adjustment •  |  |                       |
| 2                          | or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25.  Is the applicant also requesting the recurring item exception under section 461(h)(3)?   | \$<br>  Yes  | 52<br>X               |
| 3                          | Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when prep sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1a through 1g, do not agree w on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.   | as of the cle<br>aring the ba<br>eturn or othe   | ose<br>lance<br>er    |
| Pa                         | of both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  |  | own                   |
| 430                        | till Change to the Cash Method For Advance Consent Request (see instructions)  |  | own                   |
|                            |  |  | own                   |
| Appl<br>1                  | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.   | s and supplie  |                       |
| Appl<br>1<br>2             | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regular.   | s and supplie  |                       |
| Appl<br>1<br>2             | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.   | s and supplie  |                       |
| Appl<br>1<br>2             | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regular.   | s and supplie  | es                    |
| Appl<br>1<br>2<br>Sch      | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulared to the Code of Revenue B - Change in Reporting Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Payments.  | s and supplie  | es                    |
| Appl<br>1<br>2<br>Sch      | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulared to the Code of Reventure B - Change in Reporting Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Pagoular CB 991, attach the following information  | and supplie<br>ations<br>roc 2004-34   | es                    |
| Appl<br>1<br>2<br>Sch<br>1 | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulared to the Deferral Method (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Pt 2004-1 CB 991, attach the following information  A statement explaining how the advance payments meet the definition in section 4.01 of Rev Proc 2004-34.  If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section   | ations<br>roc 2004-34  | es<br>(c) of          |
| Appl 1 2 Sch 1             | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regular includes and income in Reporting Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Proc 2004-1 CB 991, attach the following information  A statement explaining how the advance payments meet the definition in section 4.01 of Rev Proc 2004-34.  If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section Rev Proc 2004-34.  If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8.05.  | ations<br>roc 2004-34<br>8.02(3)(a)-(1) of   | c) of                 |
| Appl 1 2 Sch 1 1 2 2 2 2   | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regularedule B — Change in Reporting Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Pozoud-1 CB 991, attach the following information  A statement explaining how the advance payments meet the definition in section 4.01 of Rev Proc 2004-34.  If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section Rev Proc 2004-34.  If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8.03 Proc 2004-34.  If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1 attach the following.  A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).  | ations<br>roc 2004-34<br>a 8.02(3)(a)-4<br>3(2)(a)-(f) of<br>451-5(b)(1)(                      | c) of<br>Rev          |
| Appl 1 2 Sch 1 1 2 2 2 2   | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regular includes B — Change in Reporting Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Pro 2004-1 CB 991, attach the following information  A statement explaining how the advance payments meet the definition in section 4.01 of Rev Proc 2004-34.  If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section Rev Proc 2004-34.  If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8.02 Proc 2004-34.  If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1 attach the following.   | ations  roc 2004-34  a 8.02(3)(a)-(1) of 451-5(b)(1)(1)  s are integra                         | (c) of<br>Rev<br>ii), |
| Appl<br>1<br>2<br>Sch<br>1 | Change to the Cash Method For Advance Consent Request (see instructions) icants requesting a change to the cash method must attach the following information:  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.  An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regular nedule B — Change in Reporting Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Pt 2004-1 CB 991, attach the following information  A statement explaining how the advance payments meet the definition in section 4.01 of Rev Proc 2004-34.  If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section Rev Proc 2004-34.  If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8.02 Proc 2004-34.  If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1. attach the following.  A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).  A statement explaining what portions of the advance payments, if any, are attributable to services, whether such service the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral | and supplied ations  roc 2004-34  8.02(3)(a)-(f) of 451-5(b)(1)(f) s are integral services are | Rev ii),              |

## Schedule C - Changes Within the LIFO Inventory Method (see instructions)

## Partil General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all Forms 970, Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
- a Valuing inventory (e.g., unit method or dollar-value method).
- b Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc).
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc).
- d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable.
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method
- 6 If changing to the IPIC method, attach a completed Form 970.

## Partil Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use.
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure
- b A description of the types of processes and raw materials used to produce the products in each proposed pool
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces.
- d A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- 3 If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c).

BAA

27-4577729

Form 3115 (Rev 12-2009)

Schedule D — Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see instructions)

| *Part 13 Change in Reporting Income From Long-Term Contracts (Also com  | olete Part III on pa   | ages 7 and 8)  |  |
|---|--|--|--|
| 1 To the extent not already provided, attach a description of the applicant's present and propose reporting income and expenses from long-term contracts. Also, attach a representative actual deletion) for the requested change. If the applicant is a construction contractor, attach a detailed construction activities.  | d methods for contract (without  | any  |  |
| 2 a Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instruction  | ns)?   | . <i>.</i> [   | Yes No   |
| b If 'Yes,' do all the contracts qualify for the exception under section 460(e) (see instructions)? . If line 2b is 'No,' attach an explanation.  |  |  |  |
| <sup>c</sup> If line 2b is 'Yes,' is the applicant requesting to use the percentage-of-completion method using Regulations section 1.460-4(b)?  | cost-to-cost und   | ler<br>[   | Yes No   |
| d If line 2c is 'No,' is the applicant requesting to use the exempt-contract percentage-of-complete Regulations section 1.460-4(c)(2)?  |  | [  | Yes No   |
| If line 2d is 'Yes,' attach an explanation of what cost comparison the applicant will use to deter completion factor.   | mine a contract's  |  |  |
| If line 2d is 'No,' attach an explanation of what method the applicant is using and the authority   |  | -  |  |
| 3 a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? b If 'Yes,' attach an explanation of the applicant's present and proposed method(s) of accounting manufacturing contracts.   |  | [  | _Yes ∐No   |
| C Attach a description of the applicant's manufacturing activities, including any required installation.  | on of manufactur   | ed goods.  |  |
| 4 To determine a contract's completion factor using the percentage-of-completion method   |  | _  |  |
| a Will the applicant use the cost-to-cost method in Regulations section 1 460-4(b)?   |  | <i>.</i> [   | Yes No   |
| b If line 4a is 'No,' is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))?  |  |  |  |
| 5 Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-<br>long-term contracts.   |  |  |  |
| Rartill Change in Valuing Inventories Including Cost Allocation Change  | S (Also complete   | Part III on page:  | s 7 and 8 )  |
|   |  |  |  |
| Attach a description of the inventory goods being changed.  |  |  |  |
| 2 Attach a description of the inventory goods (if any) NOT being changed  |  | Г  | ٦., ٢٦.,   |
|   | tructions)   |  | Yes No   |
| <ul> <li>2 Attach a description of the inventory goods (if any) NOT being changed</li> <li>3 a Is the applicant subject to section 263A? If 'No,' go to line 4a</li></ul>   | tructions)   | ntory<br>changed   | Yes No   |
| <ul> <li>2 Attach a description of the inventory goods (if any) NOT being changed</li> <li>3 a Is the applicant subject to section 263A? If 'No,' go to line 4a</li></ul>   | tructions) Inve  | ntory  | Yes No<br>Inventory Not<br>Being Changed   |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a   | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a   | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| 2 Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| 2 Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a   | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a   | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  | Inve<br>Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a b Is the applicant's present inventory valuation method in compliance with section 263A (see ins If 'No,' attach a detailed explanation  4 a Check the appropriate boxes below  Identification methods Specific identification FIFO LIFO Other (attach explanation) Valuation methods Cost Cost or market, whichever is lower Retail cost   | Inverse Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  b Is the applicant's present inventory valuation method in compliance with section 263A (see ins If 'No,' attach a detailed explanation  4 a Check the appropriate boxes below  Identification methods  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market                              | Inverse Being C  | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  b Is the applicant's present inventory valuation method in compliance with section 263A (see ins If 'No,' attach a detailed explanation  4 a Check the appropriate boxes below  Identification methods  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation) | Inversent method   | ntory<br>changed   | Yes No Inventory Not Being Changed Present   |
| Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  | Inversent method   | ntory<br>changed<br>Proposed<br>method                       | Yes No Inventory Not Being Changed Present method  |
| Attach a description of the inventory goods (if any) NOT being changed  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  b Is the applicant's present inventory valuation method in compliance with section 263A (see ins If 'No,' attach a detailed explanation  4 a Check the appropriate boxes below  Identification methods  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation) | Inversent method   | ntory<br>changed<br>Proposed<br>method                       | Yes No Inventory Not Being Changed Present method  |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a   | Inverse Being C Present method  following informaticant is changing  | Proposed method  | Yes No Inventory Not Being Changed Present method  |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a Is the applicant subject to section 263A? If 'No,' go to line 4a   | Inverse Being C Present method  following informaticant is changing informaticant in the changing informaticant is changing informaticant in the changing in the changing informaticant in the changing in t | Proposed method  Ition. (see instructo the method recommend) | Yes No Inventory Not Being Changed Present method  under the control of the contr |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a is the applicant subject to section 263A? If 'No,' go to line 4a   | Inverse Being C Present method  following informaticant is changing informaticant in the changing informaticant is changing informaticant in the changing in the changing informaticant in the changing in t | Proposed method  Ition. (see instructo the method recommend) | Yes No Inventory Not Being Changed Present method  under the control of the contr |
| 2 Attach a description of the inventory goods (if any) NOT being changed 3 a is the applicant subject to section 263A? If 'No,' go to line 4a   | Inverse Being C Present method  following informaticant is changing informaticant in the changing informaticant is changing informaticant in the changing in the changing informaticant in the changing in t | Proposed method  Ition. (see instructo the method recommend) | Yes No Inventory Not Being Changed Present method  under the control of the contr |

Part III

Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 ( see the instructions).)

### Section A — Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following:

- The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method).
- The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method)
- The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S ratio, or other reasonable allocation method).

## Section B — Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460 Mark 'N/A' in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

|     |  | Present method       | Proposed method                       |
|-----|--|----------------------|---------------------------------------|
| 1   | Direct material  | -                    | -                                     |
| 2   | Direct labor   |                      |                                       |
| 3   | Indirect labor   | <del> </del>         |                                       |
| 4   | Officers' compensation (not including selling activities)  |                      |                                       |
| 5   | Pension and other related costs  | _                    |                                       |
| 6   | Employee benefits  |                      |                                       |
| 7   | Indirect materials and supplies  |                      |                                       |
| 8   | Purchasing costs   |                      |                                       |
| 9   | Handling, processing, assembly, and repackaging costs  |                      |                                       |
| 10  | Offsite storage and warehousing costs  |                      |                                       |
| 11  | Depreciation, amortization, and cost recovery allowance for equipment and facilities placed in service and not temporanly idle |                      |                                       |
| 12  | Depletion  | <del></del>          |                                       |
| 13  | Rent   |                      |                                       |
| 14  | Taxes other than state, local, and foreign income taxes  |                      |                                       |
| 15  | Insurance  |                      |                                       |
| 16  | Utilities  |                      |                                       |
| 17  | Maintenance and repairs that relate to a production, resale, or long-term contract activity                                    |                      |                                       |
| 18  | Engineering and design costs (not including section 174 research and   |                      |                                       |
|     | experimental expenses)   |                      |                                       |
| 19  | Rework labor, scrap, and spoilage  |                      |                                       |
| 20  | Tools and equipment  | •                    |                                       |
| 21  | Quality control and inspection   |                      | ·                                     |
| 22  | Bidding expenses incurred in the solicitation of contracts awarded to the applicant  |                      |                                       |
| 23  | Licensing and franchise costs  |                      |                                       |
| 24  | Capitalizable service costs (including mixed service costs)  | · · - <sub>1</sub> , | · · · · · · · · · · · · · · · · · · · |
| 25  | Administrative costs (not including any costs of selling or any return on capital)   |                      |                                       |
| 26  | Research and experimental expenses attributable to long-term contracts   |                      |                                       |
| 27  | Interest   |                      |                                       |
| 28  | Other costs (Attach a list of these costs.)  |                      |                                       |
| BAA |  | F                    | orm 3115 (Rev 12-2009)                |

|      | CONTRACTOR CONTRACTOR TO THE TOTAL TOTAL   | 27-4   | 311129                            | raye   |
|------|--|--|-----------------------------------|--------|
|      | Method of Cost Allocation (see instructions) (continued)   |  | <del></del>                       |        |
|      | ction C — Other Costs Not Required To Be Allocated (Complete Section C only if the nod for these costs)  | he applicant is requestin                              | g to change its                   |        |
|      | 100 101 11636 6636 7   | D  | D                                 |        |
|      |  | Present method   | Proposed r                        | netnoa |
| 1    | Marketing, selling, advertising, and distribution expenses   | <del> </del>   |                                   |        |
| 2    | Research and experimental expenses not included in Section B, line 26  |  |                                   |        |
| 3    | Bidding expenses not included in Section B, line 22  |  |                                   |        |
| 4    | General and administrative costs not included in Section B   |  |                                   |        |
| 5    | Income taxes   |  |                                   |        |
| 6    | Cost of strikes  |  |                                   |        |
| 7    | Warranty and product liability costs   |  |                                   |        |
| 8    | Section 179 costs  |  |                                   |        |
| 9    | On-site storage  |  |                                   |        |
| 10   | Depreciation, amortization, and cost recovery allowance not included in Section B, line 11   |  |                                   |        |
| _11  | Other costs (Attach a list of these costs )  |  |                                   |        |
| Scl  | nedule E - Change in Depreciation or Amortization (see instructions)   |  |                                   |        |
| App  | licants requesting approval to change their method of accounting for depreciation or amortization co<br>licants must provide this information for each item or class of property for which a change is request   | ted  |                                   |        |
| sect | e: See the <b>List of Automatic Accounting Method Changes</b> in the instructions for information rega<br>ions 56, 167, 168, 197, 1400I, 1400L, or former section 168 Do not file Form 3115 with respect to c<br>ications (see instructions).  | ertain late elections and                              | election                          |        |
| 1    | Is depreciation for the property determined under Regulations section 1 167(a)-11 (CLADR)? If 'Yes,' the only changes permitted are under Regulations section 1.167(a)-11(c)(1)(iii) —   |  | · · Tyes                          | No     |
| 2    | Is any of the depreciation or amortization required to be capitalized under any Code section (e.g.,  | section 263A)?   | · · Yes                           | No     |
|      | If 'Yes,' enter the applicable section   |  |                                   |        |
| 3    | Has a depreciation, amortization, or expense election been made for the property (e.g., the election section 168(f)(1), 179, or 179C)?   | on under<br>· · · · · · · · · · · · · · · ·            | Yes                               | No     |
|      | If 'Yes,' state the election made  |  |                                   |        |
| 4    | a To the extent not already provided, attach a statement describing the property being changed. Incompression of property, the year the property was placed in service, and the property's use in the applicant's transfer activity.   | rade or business or inco                               | ne type<br>me-                    | _      |
|      | b If the property is residential rental property, did the applicant live in the property before renting it?  |  | · · LYes                          | ∐_No   |
|      | c Is the property public utility property?   |  | Yes                               | No     |
| 5    | To the extent not already provided in the applicant's description of its present method, attach a statement under the applicant's present method (e.g., depreciable property, inventory property, supply nondepreciable section 263(a) property, property deductible as a current expense, etc.)                       | atement explaining how<br>lies under Regulations s     | the property is<br>ection 1.162-3 | ,      |
| 6    | If the property is not currently treated as depreciable or amortizable property, attach a statement change to depreciate or amortize the property.   | of the facts supporting th                             | e proposed                        |        |
| 7    | If the property is currently treated and/or will be treated as depreciable or amortizable property, the present (if applicable) and proposed methods   | e following information for                            | or both the                       |        |
|      | a The Code section under which the property is or will be depreciated or amortized (e.g., section 16   | i8(g))   |                                   |        |
|      | b The applicable asset class from Rev Proc 87-56, 1987-2 CB 674, for each asset depreciated unditation; the applicable asset class from Rev Proc 83-35, 1983-1 CB 745, for each asset depreciate explanation why no asset class is identified for each asset for which an asset class has not been in the contraction. | ed under former section                                | 168 (ACRS), a                     |        |
|      | c The facts to support the asset class for the proposed method.  |  |                                   |        |
|      | d The depreciation or amortization method of the property, including the applicable Code section (e under section 168(b)(1)).  | .g., 200% declining bala                               | nce method                        |        |
|      | e The useful life, recovery period, or amortization period of the property.  |  |                                   |        |
|      | f The applicable convention of the property.   |  |                                   |        |
|      | 9 A statement of whether or not the additional first-year special depreciation allowance (for example 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide depreciation allowance was or will be claimed   | e, as provided by section<br>e an explanation as to wi | 168(k), 168(l)<br>ny no special   | •      |

## **MISCELLANEOUS STATEMENT:**

## Part II Line 13

Non-profit organization whose mission is to lead the community in a partnership that builds and sustains quality after school programs. Collective for Youth engages with after school providers on building a community wide system that supports quality standards, use of reliable data, and access to professional development opportunities for staff. Collective for Youth also focuses on building community partnerships to provide afterschool programs to seven middles schools in Omaha Public Schools. Programs are high quality experiences that focus on academic support and enrichment activities for youth. Youth that attend regularly improve their grades, school attendance, and have less negative behaviors.

## **MISCELLANEOUS STATEMENT:**

## Schedule A, Part I, Line 1 and Line 3

| Net assets as of January 1, 2014 - Modified Cash Basis   | \$ 1,944,320      |
|--|-------------------|
| Accounts receivable at January 1, 2014                   | 367,708           |
| Prepaid expenses and other assets at January 1, 2014     | 7,535             |
| Accounts payable at January 1, 2014                      | (313,373)         |
| Accrued payroll and other liabilities at January 1, 2014 | (9,470)<br>52,400 |
| Net assets as of January 1, 2014 - Accrual Basis         | \$ 1,996,720      |

# MISCELLANEOUS STATEMENT:

## Schedule A, Part I, Line 3

## Year Ended December 31, 2013

## **ASSETS**

| Cash                             | \$ 1,424,531 |  |
|----------------------------------|--------------|--|
| Investments                      | 511,436      |  |
| Property and equipment (at cost) |              |  |
| Office equipment                 | \$ 51,318    |  |
| Leasehold improvements           | 2,080        |  |
| ·                                | 53,398       |  |
| Less accumulated depreciation    | (45,045)     |  |
|                                  |              |  |
| Net property and equipment       | \$ 8,353     |  |
| Total assets                     | \$ 1,944,320 |  |
|                                  |              |  |
| NET ASSETS                       |              |  |
| Unrestricted                     | \$ 161,775   |  |
| Temporarily restricted           | 1,782,545    |  |
| Total net assets                 | \$ 1,944,320 |  |

## Year Ended December 31, 2013

## **CHANGES IN UNRESTRICTED NET ASSETS**

## UNRESTRICTED REVENUES COLLECTED AND SELECTED GAINS

| Grants collected                                 | \$ 1,843,516                       |
|--|------------------------------------|
| Unrealized gain on investments                   | 6,797                              |
|  |                                    |
| Total revenues collected and selected gains      | \$ 1,850,313                       |
|  | <b>A</b> 4 <b>CO</b> 4 <b>T</b> CO |
| Released from restrictions                       | \$ 1,081,786                       |
| EXPENSES PAID AND SELECTED ACCRUALS              |                                    |
| Program services                                 | \$ 2,841,494                       |
| Management and general                           | 62,977                             |
| Fundraising                                      | 20,993                             |
|  |                                    |
| Total expenses paid and selected accruals        | \$ 2,925,464                       |
| · INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS | \$ 6,635                           |
| CHANGES IN TEMPORARILY RESTRICTED NET ASSETS     |                                    |
| Grants collected                                 | \$ 2,650,136                       |
| Net assets released from restrictions            | (1,081,786)                        |
|  |                                    |
| INCREASE IN TEMPORARILY RESTRICTED NET ASSETS    | \$ 1,568,350                       |
| CHANGE IN NET ASSETS                             | \$ 1,574,985                       |
| NET ASSETS AT BEGINNING OF YEAR                  | 369,335                            |
| NET ASSETS AT END OF YEAR                        | \$ 1,944,320                       |