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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

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

A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020

B Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AMERICAN INDIAN YOUTH RUNNING STRONG

Doing business as

RUNNING STRONG FOR AMERICAN INDIAN YOUTH

Number and street (or P.O. box if mail is not delivered to street address)

8301 RICHMOND HIGHWAY NO 200

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

ALEXANDRIA, VA 22309

F Name and address of principal officer:

BRYAN L KRIZEK

8301 RICHMOND HIGHWAY NO 200

ALEXANDRIA, VA 22309

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶ 3299

D Employer identification number

54-1594578

E Telephone number

(703) 317-9881

G Gross receipts \$ 5,898,675

I Tax-exempt status:

☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.INDIANYOUTH.ORG

K Form of organization:

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1990

M State of legal domicile: VA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:

WE GIVE AMERICAN INDIAN YOUTH AND THEIR FAMILIES THE TOOLS AND HOPE TO BUILD A BETTER LIFE.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

b Net unrelated business taxable income from Form 990-T, line 39

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶45,176

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Prior Year

4,377,101

0

43,194

26,879

4,447,174

Current Year

5,406,428

0

81,776

39,665

5,527,869

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2020-11-06

Date

BRYAN L KRIZEK PRESIDENT/CEO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date 2020-11-06

Check ☐ if self-employed

PTIN P01365820

Firm's name ▶ MARCUM LLP

Firm's EIN ▶ 11-1986323

Firm's address ▶ 1899 L STREET NW SUITE 850

WASHINGTON, DC 20036

Phone no. (202) 227-4000

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

OUR MISSION IS TO HELP NATIVE YOUTH MEET CRITICAL NEEDS - FOOD, WATER AND SHELTER - WHILE SUPPORTING LOCAL EFFORTS TO INCREASE SELF-SUFFICIENCY AND SELF-ESTEEM.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code:) (Expenses \$ 3,482,229 including grants of \$ 2,341,429) (Revenue \$)
	See Additional Data

4b	(Code:) (Expenses \$ 1,447,713 including grants of \$ 945,208) (Revenue \$)
	See Additional Data

4c	(Code:) (Expenses \$ 101,057 including grants of \$ 65,980) (Revenue \$)
	See Additional Data

4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)

4e	Total program service expenses ▶	5,030,999
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
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	No
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	No
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	No
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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	No
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	No
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 Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
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 Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
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	No
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	No
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	No
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	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 	21 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	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	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No
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	No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
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	No
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	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
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	No
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	No
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	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 10			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 720, Schedule N.		15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		No

Part VI

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed▶

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT, VA, WV, WI

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
▶BIEU DO CFO 8301 RICHMOND HIGHWAY SUITE 200 ALEXANDRIA, VA 22309 (703) 317-9086

Part VII**Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRYAN L KRIZEK PRESIDENT/CEO	3.00 57.00			X				0	291,212	38,437
(2) PAUL E KRIZEK ESQ VICE PRESIDENT/GENERAL COUNSEL	3.00 57.00			X				0	242,532	30,223
(3) LAUREN HAAS FINKELSTEIN EXECUTIVE DIRECTOR	50.00 0.00			X				121,869	0	29,804
(4) BIEU DO CFO	3.00 57.00			X				0	95,282	18,976
(5) JAMES J O'BRIEN ESQ CHAIRMAN	2.00 6.00	X		X				0	0	0
(6) ELAYNE SILVERSMITH TREASURER	2.00 4.00	X		X				0	0	0
(7) ASHLEY WAHIARONKWAS MORRIS SECRETARY	2.00 0.00	X		X				0	0	0
(8) LORETTA AFRAID OF BEAR COOK DIRECTOR	2.00 6.00	X						0	0	0
(9) EMIL HER MANY HORSES DIRECTOR	6.00 1.00	X						0	0	0
(10) REAR ADMIRAL ERIC C JONES DIRECTOR	2.00 6.00	X						0	0	0
(11) CLYDE B RICHARDSON DIRECTOR	2.00 6.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								121,869	629,026	117,440

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► **1**

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► **0**

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Part VIII Statement of Revenue													
Check if Schedule O contains a response or note to any line in this Part VIII										☐			
										(A)	(B)	(C)	(D)
										Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .		1a	57,590									
	b Membership dues . . .		1b										
	c Fundraising events . . .		1c										
	d Related organizations		1d	2,964,497									
	e Government grants (contributions)		1e	47,315									
	f All other contributions, gifts, grants, and similar amounts not included above		1f	2,337,026									
	g Noncash contributions included in lines 1a - 1f:\$		1g	1,958,458									
	h Total. Add lines 1a-1f		5,406,428										
Program Service Revenue	2a		Business Code										
	b												
	c												
	d												
	e												
	f All other program service revenue.												
	g Total. Add lines 2a-2f.												
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					44,217				44,217			
	4 Income from investment of tax-exempt bond proceeds												
	5 Royalties												
			(i) Real	(ii) Personal									
	6a Gross rents		6a										
	b Less: rental expenses		6b										
	c Rental income or (loss)		6c										
	d Net rental income or (loss)												
			(i) Securities	(ii) Other									
	7a Gross amount from sales of assets other than inventory		7a	408,365									
	b Less: cost or other basis and sales expenses		7b	370,806									
	c Gain or (loss)		7c	37,559									
	d Net gain or (loss)				37,559				37,559				
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a										
	b Less: direct expenses		8b										
	c Net income or (loss) from fundraising events												
	9a Gross income from gaming activities. See Part IV, line 19		9a										
	b Less: direct expenses		9b										
	c Net income or (loss) from gaming activities												
	10a Gross sales of inventory, less returns and allowances		10a										
b Less: cost of goods sold		10b											
c Net income or (loss) from sales of inventory													
Miscellaneous Revenue			Business Code										
11a TOUR INCOME			900099		17,984				17,984				
b SALE INCOME			900099		16,131				16,131				
c MISCELLANEOUS			900099		5,550				5,550				
d All other revenue													
e Total. Add lines 11a-11d					39,665								
12 Total revenue. See instructions					5,527,869		0		121,441				

Form 990 (2019)

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,352,617	3,352,617		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	178,320	178,320		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	415,328	415,328		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	11,373	11,373		
9 Other employee benefits	23,944	23,944		
10 Payroll taxes	44,556	44,556		
11 Fees for services (non-employees):				
a Management				
b Legal	61		61	
c Accounting	12,480		12,480	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	4,277		4,277	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	191,569	171,569		20,000
12 Advertising and promotion	1,072	1,072		
13 Office expenses	128,445	104,147	7,104	17,194
14 Information technology				
15 Royalties				
16 Occupancy	15,711	7,439	8,272	
17 Travel	65,884	63,915	1,969	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	17,776	17,245	531	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	26,932	26,932		
23 Insurance	14,067	14,067		
24 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 PROCUREMENT FEES	535,898	535,898		
b SHIPPING	59,632	48,352	3,298	7,982
c BAD DEBT EXPENSE	25,094		25,094	
d HONORARIUM	14,225	14,225		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,139,261	5,030,999	63,086	45,176
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		146,830	1	345,096	
	2	Savings and temporary cash investments		69,802	2	37,711	
	3	Pledges and grants receivable, net		62,238	3	75,596	
	4	Accounts receivable, net		5,523	4	13,889	
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use		158,288	8	127,625	
	9	Prepaid expenses and deferred charges		5,347	9	15,038	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	340,226			
	b	Less: accumulated depreciation	10b	111,769	146,491	10c	228,457
	11	Investments—publicly traded securities		1,668,180	11	1,810,036	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
16	Total assets. Add lines 1 through 15 (must equal line 34)		2,262,699	16	2,653,448		
Liabilities	17	Accounts payable and accrued expenses		62,138	17	114,191	
	18	Grants payable			18		
	19	Deferred revenue		17,393	19	0	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		146,439	25	136,562	
	26	Total liabilities. Add lines 17 through 25		225,970	26	250,753	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		1,974,491	27	2,351,642	
	28	Net assets with donor restrictions		62,238	28	51,053	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		2,036,729	32	2,402,695	
33	Total liabilities and net assets/fund balances		2,262,699	33	2,653,448		

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,527,869
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,139,261
3	Revenue less expenses. Subtract line 2 from line 1	3	388,608
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,036,729
5	Net unrealized gains (losses) on investments	5	-22,642
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,402,695

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Software ID:
Software Version:
EIN: 54-1594578
Name: AMERICAN INDIAN YOUTH RUNNING STRONG

Form 990 (2019)

Form 990, Part III, Line 4a:

FOOD, WATER AND CRITICAL NEEDS - (PINE RIDGE AND CHEYENNE RIVER SIOUX INDIAN RESERVATIONS IN SOUTH DAKOTA, NAVAJO INDIAN RESERVATION IN ARIZONA AND NEW MEXICO, MENOMINEE INDIAN RESERVATION IN WISCONSIN AND OTHER NATIVE COMMUNITIES NATIONWIDE) ALL CHILDREN NEED TO HAVE ACCESS TO HEALTHY FOOD TO GROW AND THRIVE. IMPOVERISHED ECONOMIC REALITIES OF RURAL AND RESERVATION LIFE CHALLENGE MANY AMERICAN INDIAN COMMUNITIES TO MEET THEIR CHILDREN'S BASIC NEEDS. RUNNING STRONG IS DEDICATED TO SUPPORTING NATIVE COMMUNITY LEADERS AND FAMILY'S EFFORTS TO ENSURE THAT THEIR CHILDREN HAVE A HEALTHY START.(SEE SCHEDULE O FOR CONTINUATION)THIS YEAR, IN LIGHT OF THE COVID-19 PANDEMIC, THESE NEEDS BECAME EVEN MORE IMPORTANT. RUNNING STRONG LEAPT INTO ACTION, INCREASING OUR SUPPORT FOR CRITICAL NEEDS WITH MORE FOOD AND WATER CONNECTIONS ALONG WITH DONATING 624 GALLONS OF HAND SANITIZER, 44,000 LATEX GLOVES, AND 198 MASKS TO AID NATIVE COMMUNITIES.FOOD REMAINS A RUNNING STRONG PRIORITY AS WE WORK HARD TO FEED CHILDREN WHO MAY OTHERWISE GO HUNGRY. USING OUR PINE RIDGE FIELD OFFICE WAREHOUSE, RUNNING STRONG DONATED OVER 10,000 FOOD BOXES (10,200 TOTAL; 6,800 FROZEN AND 3,400 DRY FOOD BOXES) TO FEED FAMILIES ON THE PINE RIDGE AND CHEYENNE RIVER SIOUX INDIAN RESERVATIONS ALONG WITH 3,400 TURKEYS FOR THANKSGIVING AND CHRISTMAS. EACH FOOD BOX WEIGHED APPROXIMATELY 35 LBS. AND HAD ENOUGH NUTRITIOUS FOOD TO FEED A FAMILY OF FOUR OR A WEEK.AFTER TEACHERS TOLD US STUDENTS RETURNED TO SCHOOL AFTER WEEKENDS AND SCHOOL BREAKS LISTLESS AND HUNGRY, WE STARTED OUR WEEKEND/SCHOOL BREAK BACKPACK FOOD PROGRAM. ON CHEYENNE RIVER, WE DONATE SACKS FILLED WITH FOOD TO TAKINI SCHOOL CHILDREN OVER WEEKENDS AND SCHOOL BREAKS WHEN THEY DO NOT HAVE ACCESS TO FREE SCHOOL LUNCHES AND BREAKFASTS (150 STUDENTS PER WEEK, 4,200 SACKS OF FOOD DISTRIBUTED). WE ALSO SUPPORT A BACKPACK FOOD PROGRAM ON THE MENOMINEE INDIAN RESERVATION IN WISCONSIN, SERVING HEALTHY "SMART SACKS" FOR THE ENTIRE KESHENA PRIMARY SCHOOL (4-YEAR-OLD PRE-K - 5TH GRADE STUDENTS. 450 CHILDREN PER WEEK, 13,500 SACKS OF FOOD). KIDS WERE NOT ONLY KEPT FROM BEING HUNGRY, THEY LEARNED ABOUT NUTRITION AND EXERCISE AS PART OF A COMPREHENSIVE PROGRAM TO ENCOURAGE HEALTHY LIFE CHOICES.AFTER THE SCHOOL YEAR ENDS, RUNNING STRONG SERVED A HEALTHY SACK LUNCH TO CHEYENNE RIVER KIDS IN THREE COMMUNITIES SO THAT THESE KIDS HAVE SOMETHING TO EAT DURING THEIR SUMMER VACATION WHEN THEY DO NOT HAVE ACCESS TO A FREE SCHOOL LUNCH AND BREAKFAST. THIS SUMMER FOOD PROGRAM SERVED 5,647 MEALS TO CHILDREN AT 3 SITES OVER 10 WEEKS, AVERAGING 117 KIDS SERVED PER DAY (A 12% INCREASE OVER THE PREVIOUS YEAR).BASIC NEEDS - IN ADDITION TO HEALTHY MEALS AND FOOD, IN FY20, RUNNING STRONG ALSO DISTRIBUTED THE FOLLOWING NEW ITEMS TO HELP NEEDY AMERICAN INDIAN CHILDREN:3,000 #STUDYSTRONG BACKPACKS FILLED WITH SCHOOL SUPPLIES (24 CT. CRAYONS, ERASER, GLUE STICK, NOTEBOOK, PEN, NO. 2 PENCILS, RULER, PENCIL SHARPENER, 5" SCISSORS, PAPER) FOR ELEMENTARY SCHOOL STUDENTS, 2,000 #STUDYSTRONG BACKPACKS FILLED WITH SCHOOL SUPPLIES (2 POCKET FOLDERS, NOTEBOOKS, LOOSE LEAF PAPER, ERASERS, COLORED PENCILS, PROTRACTORS, GLUE STICKS, NO. 2 PENCILS, RULER, HIGHLIGHTERS, RED & BLACK PENS, CALCULATOR, PENCIL POUCH, PENCIL SHARPENER) FOR JR. HIGH AND HIGH SCHOOL STUDENTS SO NATIVE STUDENTS HAVE THE TOOLS THEY NEED TO SUCCEED IN SCHOOL.1,500 #WARM&STRONG ADULT COATS WITH HOODS, 3,492 #WARM&STRONG KIDS COATS WITH HOODS, 3,520 #WARM&STRONG WINTER KITS (HATS, GLOVES, AND SCARVES), 5,592 PAIRS OF WINTER BOOTS, AND 2,000 BLANKETS TO STAY SAFE AND WARM DURING HARSH WINTER WEATHER.WE DONATED 3,076 NEW TOYS FOR THE HOLIDAYS, 3,664 PAIRS OF NEW SHOES, ESSENTIAL (AND EXPENSIVE) BASICS INCLUDING 10,608 BARS OF SOAP, 111,952 DIAPERS AND 3,275 #SMILESTRONG DENTAL KITS (WITH TOOTHBRUSHES, TOOTHPASTE, FLOSSERS AND A TIMER) FOR BETTER ORAL HEALTH, WHICH OFTEN SUFFERS IN IMPOVERISHED COMMUNITIES.ALONG WITH DISTRIBUTIONS DIRECTLY TO FAMILIES ON PINE RIDGE AND CHEYENNE RIVER, THESE BRAND-NEW ITEMS (LISTED ABOVE) WERE DONATED TO MEET CRITICAL NEEDS TO 29 COMMUNITY PARTNERS IN 12 STATES ACROSS THE COUNTRY. THESE YOUTH SUPPORTIVE PROGRAM PARTNERS INCLUDED DIRECT DISTRIBUTION ON PINE RIDGE & CHEYENNE RIVER SIOUX INDIAN RESERVATIONS, BLOSSOM SUSTAINABLE DEVELOPMENT, BRAVE HEART SOCIETY, BRIDGE FOUNDATION, BRUSHY CHEROKEE ACTION ASSOCIATION, CHEROKEE NATION FOUNDATION, CHEYENNE RIVER YOUTH PROJECT, DENVER INDIAN CENTER, DENVER INDIAN FAMILY RESOURCE CENTER, HOOPA TRIBAL EDUCATION ASSOCIATION, INTERFAITH ACTION DEPARTMENT OF INDIAN WORK, IOWA TRIBE OF KS & NE, NATIVE GRANDPARENTS, NAVAJO HOPI HONOR RIDERS, NEBO TITLE VI INDIAN EDUCATION, NORTHERN CHEYENNE BOYS & GIRLS CLUB, PROVO CITY SCHOOLS, ROSEBUD ELEMENTARY, ROUND VALLEY UNIFIED SCHOOL DISTRICT, RURAL COMMUNITIES INITIATIVE FOUNDATION, SACRED HEALING CIRCLE, SACRED PIPE RESOURCE CENTER, SALT LAKE CITY AIR PROTECTORS, SMEE SCHOOL DISTRICT, SPIRIT LAKE TRIBAL HEALTH, SUMMIT SCHOOL, THREE PRECIOUS MIRACLES, TODAY WE FOLLOW TOMORROW WE LEAD, YUCHI LANGUAGE PROJECT.RUNNING STRONG ALSO SUPPORTS ORGANIC GARDENING EFFORTS AS COMMUNITIES WORKED TO GROW THEIR OWN FOOD. IN FY20, WE CONTINUED TO INVEST IN OYATE TECA (YOUTH NATION'S) MEDICINE ROOT GARDENING PROGRAM, WHICH IS ALSO THE SITE OF ONE OF OUR FIELD OFFICES ON THE PINE RIDGE INDIAN RESERVATION IN SOUTH DAKOTA. THANKS TO A PARTNERSHIP WITH USDA, WE PURCHASED CRITICAL GARDENING EQUIPMENT: A NEW 50 HP TRACTOR AND USED PICK UP TRUCK TO HAUL IT SO THAT OYATE TECA CAN TILL THEIR DEMONSTRATION AND STUDENT GARDENS.THANKS TO GENEROUS SUPPORT FROM NEWMAN'S OWN FOUNDATION, RUNNING STRONG CONTINUES TO PROVIDE FOUNDATIONAL SUPPORT FOR OYATE TECA'S 16-WEEK GARDEN EDUCATION CLASSES WHICH HOW TO GROW, HARVEST, PREPARE AND EAT FRESH PRODUCE ON PINE RIDGE. A BIG PART OF THE CLASS IS HANDS-ON INSTRUCTION AND THE TOOLS TO PLAN & PLANT YOUR OWN GARDEN. WITH THE COVID-19 PANDEMIC, OYATE TECA MOVED ITS CLASSES ONLINE (INCREASING ITS REACH TO 181 INDIVIDUALS) WHILE STILL PROVIDING THE TOOLS, SEEDLINGS AND FENCING TO PLANT 40 STUDENT GARDENS ALONG WITH THE EXTENSIVE DEMONSTRATION GARDEN AND GREENHOUSES LOCATED BY THE OYATE TECA COMMUNITY CENTER. A STRONG STORM DESTROYED 4 GARDENS AND ANOTHER RIPPED OFF THE GREENHOUSE COVER, BUT THE PROGRAM PERSEVERED, MADE THE NECESSARY REPAIRS AND STILL PRODUCED 9 TONS OF FRESH PRODUCE WHICH WAS SOCIALLY DISTANCED SOLD AT LOCAL FARMERS MARKETS AS WELL AS GIFTED AND COMPOSTED.ACTING AS A BUYER, RUNNING STRONG HELPED OYATE TECA PILOT A FRESH PRODUCE BOX DISTRIBUTION, PURCHASING PRODUCE GROWN BY GARDEN CLASS PARTICIPANTS AND LOCAL FARMERS AND DISTRIBUTING TO COMMUNITY MEMBERS AT NO COST. 399 FRESH PRODUCE BOXES WERE DISTRIBUTED IN THE SUMMER AND INCLUDED A VARIETY OF TOMATOES, ZUCCHINI, SQUASH, GREEN PEPPERS, BEETS, ONIONS, LEEKS, CUCUMBERS, POTATOES, EGGPLANTS AND PUMPKINS. STUDENT SALES OF THEIR OWN GROWN PRODUCE PROVIDED NEEDED INCOME AND INCREASED THE QUALITY OF FOOD OFFERINGS IN THE LOCAL COMMUNITY. WE ALSO CONTINUED OUR LONG-TERM SUPPORT OF SLIM BUTTES AGRICULTURAL DEVELOPMENT PROGRAM ON PINE RIDGE, WHICH PLANTED 126 GARDENS IN 3 DISTRICTS, DISTRIBUTED 6,000 SEEDLINGS TO GROWERS, HOSTED 12 WEEKS OF EDUCATIONAL RADIO PROGRAMMING AND PROVIDED COVID PANDEMIC EMERGENCY SERVICES. RUNNING STRONG GRANTS ALSO SUPPORTED THE YUCHI LANGUAGE PROJECT'S TRADITIONAL FOODS GARDEN IN SAPULPA, OK AND THE BRAVE HEART SOCIETY'S GARDENS AND MEDICINAL PLANTS AT YANKTON IN LAKE ANDES, SD.WATER - WATER IS A CRITICAL NEED AND THERE ARE STILL FAMILIES LIVING WITHOUT ACCESS TO SAFE RUNNING WATER ON INDIAN RESERVATIONS. ON THE PINE RIDGE INDIAN RESERVATION, OGLALA LAKOTA FAMILIES CAN LIVE WITHIN YARDS OF THE MINI WICONI (WATER IS LIFE) WATER LINE WITHOUT FUNDS TO SAFELY HOOK UP TO IT. IN FY20, WITH SUPPORT FROM THE BOULDER ROTARY CLUB, RUNNING STRONG'S PINE RIDGE WATER PROJECT PROVIDED HYDRANTS, WATER CONNECTIONS, PLUMBING REPAIRS AND SEPTIC SYSTEMS TO 42 FAMILIES SO THAT THEY DID NOT HAVE TO CONTINUE TO LIVE WITHOUT WATER (253 PEOPLE SERVED, 127 OF WHOM ARE CHILDREN). SOME OF THESE OGLALA FAMILIES HAD LIVED WITHOUT RUNNING WATER FOR 20 YEARS OR HAD TO HAUL IT FROM 8 MILES AWAY, WE ALSO MET CRITICAL WATER NEEDS ON THE NAVAJO INDIAN RESERVATION. IN 2020, RUNNING STRONG'S DIN NAABEEH T (NAVAJO WATER) PROGRAM ON THE NAVAJO NATION HELPED 12 DIN (NAVAJO) FAMILIES WITH SEPTIC SYSTEMS, WATER LINES, PLUMBING REPAIRS AND FIXTURES SO THAT THEY HAD ACCESS TO SAFE WATER (55 INDIVIDUALS SERVED, 21 OF WHOM ARE CHILDREN).

Form 990, Part III, Line 4b:

YOUTH, LANGUAGE AND CULTURE (PINE RIDGE, CHEYENNE RIVER SIOUX AND YANKTON INDIAN RESERVATIONS IN SOUTH DAKOTA, AND OTHER NATIVE COMMUNITIES NATIONWIDE). RUNNING STRONG WHOLEHEARTEDLY ADVOCATES FOR NATIVE YOUTH PROSPERITY AND ACADEMIC SUCCESS. WE SUPPORTED THE LONG-TERM WORK PROVIDED BY THE DIVISION OF INDIAN WORK, WHOSE SPECIFIC ACTIVITIES WERE ACADEMIC SUPPORT TO ENCOURAGE YOUTH TO SUCCEED IN SCHOOL AND IN THE COMMUNITY, TEACHING YOUTH HOW AMERICAN INDIAN CULTURE AND LIFE SKILLS CAN BE USED AS PREVENTIVE MEASURES AGAINST ALCOHOL, TOBACCO, AND DRUG ABUSE, WAUNYAWAPI TO HELP YOUTH IMPROVE THEIR READING AND LITERACY SKILLS, AND NIIBIN MINWEDAAGWAD WHICH PROVIDED CULTURAL TEACHINGS AND RECREATIONAL ACTIVITIES (90 FAMILIES AND 100 CHILDREN (SEE SCHEDULE O FOR CONTINUATION)SERVED). RUNNING STRONG ALSO DONATED \$1,000 TOWARDS REBUILDING THE MIGIZI COMMUNICATIONS FACILITY AS IT WAS DAMAGED DURING THESE TRANSFORMATIVE TIMES. THE MIGIZI CENTER PRESERVES TRADITIONAL WAYS, ELDER, AND HIGH-RISK YOUTH TO EMPOWER THE NEXT GENERATION. RUNNING STRONG ALSO MADE A GENERAL SUPPORT GRANT TO SUPPORT THE CHEYENNE RIVER YOUTH PROJECT'S PROGRAMS AT THE MAIN (FOR AGES 4-12) AND THE COKATA WICONI TEEN CENTER (AGES 13-18) ON THE CHEYENNE RIVER SIOUX INDIAN RESERVATION AND WE SUPPORTED TAKINI SCHOOL'S EFFORTS TO EXPAND THEIR INDUSTRIAL ARTS TRAINING SINCE CURRENTLY THE SCHOOL CAN ONLY OFFER 2 ELECTIVES, HOME EC AND WOOD (150 ENROLLED STUDENTS). TO HELP NATIVE CHILDREN ENJOY THE HOLIDAYS LIKE ANY OTHER CHILD, ALONG WITH DONATING 3,076 BRAND NEW TOYS TO PINE RIDGE, WE SUPPORTED HOLIDAY PARTIES WITH BOYS & GIRLS CLUB OF THE NORTHERN CHEYENNE NATION (593 SERVED, 374 WERE CHILDREN), BRUSHY COMMUNITY ACTION ASSOCIATION (170 SERVED, 80 WERE CHILDREN), INDIAN YOUTH OF AMERICA (374 SERVED, 278 WERE CHILDREN), NAVAJO HOPI HONOR RIDERS (260 SERVED, 160 WERE CHILDREN), NEBO SCHOOL DISTRICT (380 SERVED, 240 WERE CHILDREN), OYATE TECA ON PINE RIDGE (692 SERVED, 564 WERE CHILDREN), SACRED HEALING CIRCLE (300 SERVED, 150 WERE CHILDREN), SACRED PIPE RESOURCE CENTER (27 SERVED, 23 WERE CHILDREN), SMEE SCHOOL DISTRICT (333 SERVED, 265 WERE CHILDREN), SUMMIT AREA ECONOMIC GROWTH (192 SERVED, 192 WERE CHILDREN), TODAY WE FOLLOW, TOMORROW WE LEAD AT NAVAJO NATION (300 CHILDREN).RUNNING STRONG CONTINUES TO SUPPORT CULTURE AND LANGUAGE REVITALIZATION EFFORTS. ROUND VALLEY UNIFIED SCHOOL DISTRICT CREATED A CURRICULUM FOR THEIR ELEMENTARY AND MIDDLE SCHOOL, GRADES K-5. THE CURRICULUM WAS BASED ON THE FOUR ILTD STANDARDS: CULTURE, LAND TENURE HISTORY, CONTEMPORARY LAND ISSUES AND BUILDING A POSITIVE FUTURE IN INDIAN COMMUNITIES. WITH OUR SUPPORT, ROUND VALLEY LOCALIZED THE CURRICULUM SO THAT THE LESSONS ARE CENTERED ON THE SEVEN TRIBES OF THE ROUND VALLEY AND ON ROUND VALLEY INDIAN TRIBES HISTORY AND LAND ISSUES. RUNNING STRONG ALSO SUPPORTED THE AFRAID OF BEAR/AMERICAN HORSE TIOSPAYE: RITES OF PASSAGE PROGRAM WHERE LAKOTA ELDER MASTER TEACHERS BROUGHT TOGETHER YOUNG WOMEN AND GIRLS TO TEACH THE ART OF MAKING SACRED FOODS, THE PRAYERS AND CEREMONY BEHIND THIS SACRED ART, AS WELL AS OTHER CULTURAL TEACHINGS THAT ARE FOUNDATIONAL TO THE OGLALA LAKOTA PEOPLES OF THE PINE RIDGE RESERVATION. WE ALSO SUPPORTED THE AKWESASNE KAHWATSI:RE (OUR FAMILY FIRE) PROGRAM AT ST. REGIS MOHAWK TRIBE, WHICH PROVIDED VALUABLE RESOURCES FOR PEOPLE SEARCHING FOR THEIR NATIVE LINEAGE. RUNNING STRONG ALSO SUPPORTED THE INTERGENERATIONAL LAKOTA HISTORY CHILDREN'S BOOK PROJECT WITH THE KEYA FOUNDATION WHERE 8 CHILDREN'S BOOKS WITH STORIES FROM LAKOTA ELDERS WERE CREATED. THE BOOKS WERE ILLUSTRATED BY YOUTH IN THE CHEYENNE RIVER SIOUX TRIBE AND WROTE WITH LAKOTA LANGUAGE TRANSLATIONS. WE ALSO SUPPORTED PROGRAMS FOR OJIBWE CHILDREN AT KAH-BAY-KAH-NONG IN WARROAD, MN (95 SERVED, 70 OF WHOM ARE CHILDREN), THE YUCHI LANGUAGE PROJECT IN SALPULPA, OK, AND THE OHERO:KON UNDER THE HUSK RITES OF PASSAGE CEREMONY ACROSS HAUDENOSAUNEE TERRITORY. UNDER THE HUSK HAS SUPPORTED OVER 1,000 INITIATES AND THEIR FAMILIES. RUNNING STRONG, A SUPPORTER OF COMMUNITY EVENTS, DONATED \$500.00 TO THE SACRED HEALING CIRCLE TREATY MEETING IN NOVEMBER 2019. THE MEETING EVEN HAD OVER 5,000 ONLINE ATTENDEES. THIS DONATION COVERED A SIGNIFICANT PORTION OF FOOD COSTS WHICH WERE PREPARED AND COOKED BY NATIVE ELDERS IN THE COMMUNITY.OUR PARTNER SINCE 1994, THE BRAVE HEART SOCIETY, CELEBRATED 25 YEARS OF CULTURAL LEADERSHIP WITH A GATHERING AND VISIT BY TO BOTH BRAVE HEART AND THE LOCAL SCHORUNNING STRONG'S SPOKESPERSON, BILLY MILLS. RUNNING STRONG SUPPORTED THE BRAVE HEART SOCIETY'S EFFORTS IN THE YANKTON, OGLALA, SICANGU, HUNKPAPA, HUNKPATI, KUL WICASA, SANTEE, SISSETON, MDEWANKTONWAN, SPIRIT LAKE, CHEYENNE RIVER AND SIOUX VALLEY NATIONS. RUNNING STRONG SUPPORTED BRAVE HEART SOCIETY'S 16TH ANNUAL WATERLILY STORYTELLING GATHERING AND 22ND ANNUAL ISNATI AWICA DOWANPI RITES OF PASSAGE (17 GIRLS PARTICIPATED IN THIS CEREMONY) AND CELEBRATED OUR 25TH YEAR OF PARTNERSHIP WITH BRAVE HEART SOCIETY. WE ALSO SUPPORTED BRAVE HEART SOCIETY'S TRADITIONAL DOLL MAKING WORKSHOP IN FEBRUARY, WHICH WAS A 5-DAY WORKSHOP TO TEACH MEMBERS HOW TO CONSTRUCT A TRADITIONAL DAKOTA DOLL USING TRADITIONAL METHODS. RUNNING STRONG ALSO SUPPORTED AN MMIWG EVENT HOSTED BY BRAVE HEART SOCIETY IN PARTNERSHIP WITH 350.ORG AND THE CHORUS FOUNDATION. THE TOTAL NUMBER OF PEOPLE SERVED WAS OVER 500, AND 300 OF THEM WERE CHILDREN UNDER THE AGE OF 18.

Form 990, Part III, Line 4c:

DREAMSTARTER (MONTANA, HAWAI'I, NORTH DAKOTA, UTAH, WASHINGTON, ALASKA, SOUTH DAKOTA, AND VIRGINIA). IN HIS TRAVELS THROUGHOUT THE NATION, OUR SPOKESPERSON BILLY MILLS HAS WITNESSED WHAT HE CALLS A "POVERTY OF DREAMS," WHEREIN NATIVE YOUTH DO NOT DARE TO DREAM. DREAMSTARTER AIMS TO JUMPSTART THESE DREAMS BY IDENTIFYING COMMITTED NATIVE YOUTH WHO CAN SHOW THE WAY. RUNNING STRONG RECOGNIZES THAT TODAY'S INDIAN YOUTH ARE OUR FUTURE LEADERS AND DESPITE THE MANY CHALLENGES THAT AMERICAN INDIAN KIDS FACE, WE CAN HELP THEM FOLLOW THEIR DREAMS.(SEE SCHEDULE O FOR CONTINUATION)IN HONOR OF THE 50TH ANNIVERSARY OF BILLY'S OLYMPIC GOLD MEDAL IN 2014, WE LAUNCHED THE DREAMSTARTER PROGRAM THAT WILL IDENTIFY 10 AMERICAN INDIAN YOUTH EACH YEAR TO RECEIVE A \$10,000 GRANT FOR EACH DREAMSTARTER YOUTH AND THEIR MENTOR ORGANIZATION TO MAKE A DREAM FOR THEIR COMMUNITY COME TRUE.2020 DREAMSTARTERS RANGED FROM AGE 16 TO 30 AND REPRESENTED EIGHT (8) DIVERSE TRIBAL COMMUNITIES: ASSINIBOINE/FORT BELKNAP INDIAN COMMUNITY, NATIVE HAWAIIAN, NAVAJO NATION, NORTHERN CHEYENNE, OGLALA LAKOTA, NATIVE VILLAGE OF KOTZEBUE/ALASKA NATIVE, SISSETON WAHPETON OYATE, AND COMANCHE NATION. 2020 MENTOR ORGANIZATIONS INCLUDED HARLEM YOUTH LEADERSHIP, KOHALA UNUPA'A, SACRED PIPE RESOURCE CENTER, NEBO SCHOOL DISTRICT TITLE VI PROGRAM, WILD ROSE CENTER, URBAN INDIAN CENTER OF SALT LAKE, UNIVERSITY OF WASHINGTON OFFICE OF EDUCATIONAL PARTNERSHIP AND DIVERSITY, FIRST ALASKANS INSTITUTE, SUMMIT SCHOOL DISTRICT, AND NATIONAL INDIGENOUS CIRCLE. THIS YEAR'S DREAMSTARTER THEME WAS HEALTH AND WELLNESS, AND DREAMS WERE A WIDE RANGE FROM STARTING A MENTORSHIP PROGRAM AT SCHOOL TO CREATING SCRUBS USING TRADITIONAL TEXTILES TO HONOR INDIGENOUS MEDICINE MODELS AND INCREASE REPRESENTATION, TO SETTING UP A MOBILE EYE CLINIC TO PROVIDE A FULL EYE EXAM TO YOUTH ON THE RESERVATIONS. EACH DREAMSTARTER IS ALSO ELIGIBLE TO APPLY FOR TRAVEL GRANTS TO VISIT EACH OTHER'S PROGRAMS AND "KEEP THE DREAM ALIVE GRANTS" ONCE THEIR GRANT YEAR WAS COMPLETE. THESE OUTSTANDING NATIVE YOUTH ARE BUILDING A NETWORK OF COMMUNITY CHANGE WHICH WILL STRENGTHEN INDIAN COUNTRY FOR GENERATIONS TO COME. FOR MORE INFORMATION VISIT, WWW.INDIANYOUTH.ORG/DREAMSTARTER.WITH 2017 DREAMSTARTER YEAR'S THEME OF EDUCATION, RUNNING STRONG LAUNCHED DREAMSTARTER TEACHER, A NEW GRANT THAT GIVES NATIVE TEACHERS AND TEACHERS WHO TEACH NATIVE CHILDREN UP TO \$1,000 TO MAKE A DREAM COME TRUE IN THEIR CLASSROOM. 9 TEACHERS WERE SELECTED WITH DREAMS RANGING FROM EQUIPPING STUDENTS WITH PEDOMETERS SO THEY CAN PARTICIPATE IN PHYSICAL EDUCATION DURING THE PANDEMIC TO PROVIDING FLEXIBLE SEATING OPTIONS FOR STUDENTS. TEACHERS CAN APPLY YEARLY IN MAY. TO LEARN MORE VISIT, WWW.INDIANYOUTH.ORG/DREAMSTARTERTEACHER.MORE INFORMATION ABOUT ALL OF OUR PROGRAMS CAN BE FOUND AT WWW.INDIANYOUTH.ORG, WHERE YOU CAN READ UPDATES, JOIN OUR EMAIL LIST OR FOLLOW US ON SOCIAL MEDIA AS WE WORK TO BUILD A STRONG GENERATION OF NATIVE YOUTH.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AMERICAN INDIAN YOUTH RUNNING STRONG

Employer identification number
54-1594578

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ 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 described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	4,543,744	3,920,010	5,255,598	4,377,101	5,406,428	23,502,881
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	4,543,744	3,920,010	5,255,598	4,377,101	5,406,428	23,502,881
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) . . .						4,651,775
6	Public support. Subtract line 5 from line 4.						18,851,106
Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .	4,543,744	3,920,010	5,255,598	4,377,101	5,406,428	23,502,881
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	31,042	31,266	33,457	45,641	44,217	185,623
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .					17,984	17,984
11	Total support. Add lines 7 through 10						23,706,488
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						
Section C. Computation of Public Support Percentage							
14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14				79.520 %	
15	Public support percentage for 2018 Schedule A, Part II, line 14	15				80.230 %	
16a	33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒						
b	33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐						
17a	10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐						
b	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐						
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐						
Schedule A (Form 990 or 990-EZ) 2019							

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c 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 VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . .						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
1		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
2		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
3a		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3b		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
4a		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
4c		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
7		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9a		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9b		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10a		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
10b		

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			
1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	TOUR INCOME - 2015 AMOUNT: \$ 0. 2016 AMOUNT: \$ 0. 2017 AMOUNT: \$ 0. 2018 AMOUNT: \$ 0. 2019 AMOUNT: \$ 17,984.

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AMERICAN INDIAN YOUTH RUNNING STRONG

Employer identification number
54-1594578

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

Conservation Easements.
Complete if the organization answered "Yes" on 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) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D Schedule D (Form 990) 2019

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a☐ Public exhibition

b☐ Scholarly research

c☐ Preservation for future generations

d☐ Loan or exchange programs

e☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
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					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		157,920	34,223	123,697
c Leasehold improvements				
d Equipment		182,306	77,546	104,760
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				228,457

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII

Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) ▶		

Part IX

Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ▶	

Part X

Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	136,562

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	5,500,950
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-22,642
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-22,642
3	Subtract line 2e from line 1	3	5,523,592
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	4,277
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	4,277
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	5,527,869

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,134,984
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,134,984
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4,277
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	4,277
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,139,261

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 54-1594578
Name: AMERICAN INDIAN YOUTH RUNNING STRONG

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAINTY IN TAX POSITIONS TAKEN FOR THE YEAR ENDED JUNE 30, 2020, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

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Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
AMERICAN INDIAN YOUTH RUNNING STRONG

Employer identification number
54-1594578

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 39

3 Enter total number of other organizations listed in the line 1 table ▶ 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	GRANT REQUESTS ARE SUBMITTED BY ORGANIZATIONS FOLLOWING RUNNING STRONG'S PUBLISHED GRANT GUIDELINES. RUNNING STRONG CONDUCTS A PRE-GRANT REVIEW TO DETERMINE THE CAPABILITY OF THE APPLICANT TO CARRY OUT THE PROJECT WHICH IS TO BE FUNDED BY THE PROPOSED GRANT. IF RUNNING STRONG DECIDES TO AWARD THE GRANT, THE CHARITY ENTERS INTO A WRITTEN GRANT AGREEMENT WITH THE GRANTEE WHICH INCLUDES FINANCIAL REPORTS BY THE GRANTEE AND NARRATIVE REPORTS SETTING FORTH THE OBJECTIVES ACCOMPLISHED BY THE PROJECT THAT IS FUNDED BY THE GRANT. THE STAFF OF RUNNING STRONG REVIEWS THE REPORTS FROM THE GRANTEE TO ASSESS WHETHER THE GRANTEE ADEQUATELY HAS ACCOUNTED FOR THE USE OF GRANT FUNDS AND THE RESULTS ACHIEVED THROUGH THE PROJECT WHICH IS FUNDED BY THE GRANT. RUNNING STRONG STAFF ALSO FROM TIME TO TIME CONDUCT ON-SITE "FIELD VISITS" TO VISIT THE PROJECT FUNDED BY THE GRANT, TROUBLESHOOT CHALLENGES AND LEARN FROM SUCCESSES. THE PROJECT FUNDED BY THE GRANT MUST BE CONSISTENT WITH THE CHARITY'S CHARITABLE PURPOSES.

Additional Data

Software ID:
Software Version:
EIN: 54-1594578
Name: AMERICAN INDIAN YOUTH RUNNING STRONG

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAVE HEART SOCIETY 300 MAIN STREET LAKE ANDES, SD 57356	54-1594578	501(C)(3)	340,282	1,972	FMV	HYGIENE	CULTURAL TEACHINGS & CRITICAL AMERICAN INDIAN NEEDS
BRUSHY - CHEROKEE ACTION ASSOCIATION 465406 E 1010 ROAD SALLISAW, OK 74955	32-0263934	501(C)(3)	3,000	56,836	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING, SCHOOL SUPPLIES	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATAWBA CULTURAL PRESERVATION PROJECT 1536 TOM STEVEN ROAD ROCK HILL, SC 29730	57-0901191	N/A	0	9,829	FMV	HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
CHEROKEE NATION FOUNDATION 800 S MUSKOGEE AVENUE TAHLEQUAH, OK 74464	73-1497804	501(C)(3)	0	50,043	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING, SCHOOL SUPPLIES	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHEYENNE RIVER YOUTH PROJECT EAST LINCOLN DRIVE EAGLE BUTTE, SD 57625	46-0423106	501(C)(3)	25,000	16,924	FMV	SCHOOL SUPPLIES	CRITICAL AMERICAN INDIAN NEEDS
CHRISTIAN RELIEF SERVICES INC 8301 RICHMOND HIGHWAY SUITE 900 ALEXANDRIA, VA 22309	54-1748859	501(C)(3)		9,878	FMV	HYGIENE	CRITICAL AMERICANS HELPING AMERICANS NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DENVER INDIAN CENTER 4407 MORRISON ROAD DENVER, CO 80219	84-0922797	501(C)(3)		38,570	FMV	HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
DIVISION OF INDIAN WORK 1001 EAST LAKE STREET MINNEAPOLIS, MN 55407	41-0693933	501(C)(3)	25,000				CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EUCHEE LANGUAGE PROJECT 1006 SOUTH MAIN STREET SAPULPA, OK 74066	45-3975380	501(C)(3)	5,820	9,616	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING, SCHOOL SUPPLIES	LANGUAGE PROGRAMS AND CRITICAL AMERICAN INDIAN NEEDS
HOOPA TRIBAL EDUCATION ASSOCIATION HOOPA VALLEY BUSINESS COUNCIL PO BOX 428 HOOPA, CA 95546	94-1477040	N/A	5,000	13,867	FMV	SCHOOL SUPPLIES	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEPT OF INDIAN WORKINTERFAITH ACTION 1671 SUMMIT AVENUE SAINT PAUL, MN 55105	41-0694741	501(C)(3)		50,293	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING, SCHOOL SUPPLIES	CRITICAL AMERICAN INDIAN NEEDS
KESHENA PRIMARY SCHOOL N530 STATE HIGHWAY 47-55 KESHENA, WI 54135	39-1248910	N/A		131,895	FMV	FOOD	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIVE GRANDPARENTS BOX 205 21270 BBB ROAD FAITH, SD 57626	82-1427563	501(C)(3)		19,927	FMV	BOOTS AND SHOES, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
BOYS AND GIRLS CLUB OF THE NORTHERN CHEYENNE NATION 101 CHEYENNE AVENUE LAME DEER, MT 59043	36-3945776	501(C)(3)	2,000	57,982	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING, SCHOOL SUPPLIES	YOUTH PROGRAMS AND CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SMEE SCHOOL DISTRICT 12250 SD HWY 1806 WAKPALA, SD 57642	46-6001279	SCHOOL		6,608	FMV	BOOTS AND SHOES, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
PINE RIDGE RESERVATION DISTRICTS PINE RIDGE INDIAN RESERVATION PINE RIDGE, SD 57770	46-0217222	N/A	447,982	562,703	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING, FOOD	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROVO CITY SCHOOL DISTRICT 280 WEST 940 NORTH PROVO, UT 84604	87-6000511	501(C)(3)		35,519	FMV	SCHOOL SUPPLIES, HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
SACRED PIPE RESOURCE CENTER 424 ASHWOOD AVENUE BISMARCK, ND 58504	26-1088259	501(C)(3)		6,847	FMV	HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SLIM BUTTES AGRICULTURAL DEVELOPMENT PROGRAM PO BOX 3014 PINE RIDGE, SD 57770	20-8332945	N/A	23,573				ORGANIC GARDENS AND CRITICAL AMERICAN INDIAN NEEDS
SPIRIT LAKES TRIBAL HEALTH DEPARTMENT PO BOX 480 FT TOTTEN, ND 58335	45-0134494	N/A		13,519	FMV	BOOTS AND SHOES, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMMIT SCHOOL DISTRICT 54-6 PO BOX 791 SUMMIT, SD 57266	46-6002856	N/A		14,363	FMV	SCHOOL SUPPLIES, HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
TAKINI SCHOOL HC 77 HOWES, SD 57748	46-0406180	N/A	10,000	44,453	FMV	FOOD	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THREE PRECIOUS MIRACLES 1286 W FALLS CANYON DRIVE CASA GRANDE, AZ 85122	86-0975231	501(C)(3)		37,563	FMV	SCHOOL SUPPLIES, BOOTS AND SHOES, HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
TODAY WE FOLLOW- TOMORROW WE LEAD SUNNYSIDE 98 CHINLE, AZ 86503	46-3206765	N/A	2,500	64,012	FMV	SCHOOL SUPPLIES, HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBO SCHOOL DISTRICT 1175 E FLONETTE DR SPANISH FORK, UT 84660	87-6000505	501(C)(3)		13,881	FMV	BOOTS AND SHOES, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
NAVAJO HOPI HONOR RIDERS PO BOX 266 WINDOW ROCK, AZ 85204	27-2572455	501(C)(3)	2,500	21,661	FMV	SCHOOL SUPPLIES, HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA TRIBE OF KS & NE BOYS AND GIRLS CLUB 2169 IOWA DRIVE WHITE CLOUD, KS 66046	63-0489646	N/A		60,680	FMV	BOOTS AND SHOES, HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
BLOSSOM SUSTAINABLE DEVELOPMENT 50 HILL STREET SUITE 114 SOUTHAMPTON, NY 11968	46-0424521	501(C)(3)		6,467	FMV	BOOTS AND SHOES, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RURAL COMMUNITIES INITIATIVE FOUNDATION 301 S LOCUST ST SALLISAW, OK 74955	83-0268521	501(C)(3)		9,785	FMV	HYGIENE, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS
TRIBAL ADAPTIVE ORGANIZATION 1718 MARIPOSA DRIVE DURANGO, CO 81301	81-4076368	501(C)(3)	13,000				DREAMSTARTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHEYENNE RIVER SIOUX RESERVATION DISTRICTS EAGLE BUTTE, SD 57625	46-0423106	501(C)(3)		406,962	FMV	FOOD	CRITICAL AMERICAN INDIAN NEEDS
MICA GROUP (OHEROKON UNDER THE HUSK) 5301 SPRINGLAKE WAY BALTIMORE, MD 21212	82-1503506	501(C)(3)	30,000				LONGHOUSE CULTURAL PRACTICE TEACHINGS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OGLALA SIOUX TRIBE PARTNERSHIP FOR HOUSING PO BOX 3001 PINE RIDGE, SD 57770	46-0451277	501(C)(3)	50,485				CRITICAL AMERICAN INDIAN NEEDS, HOME REPAIRS
OYATE TECA PROJECT PO BOX 316 KYLE, SD 57752	46-0438929	501(C)(3)	105,724				CRITICAL AMERICAN INDIAN NEEDS, GARDENS AND YOUTH PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SACRED HEALING CIRCLE 4409 COUNTY ROAD 200 FLORENCE, AL 35633	65-1261804	501(C)3)	23,000	7,007	FMV	BLANKETS	CRITICAL AMERICAN INDIAN NEEDS, HOME REPAIRS AND CULTURAL TEACHINGS
THE KEYA FOUNDATION PO BOX 1824 EAGLE BUTTE, SD 57625	46-0879346	501(C)(3)	25,000				SERIES OF CHILDREN'S LAKOTA LANGUAGE BOOKS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALT LAKE CITY AIR PROTECTORS 7768 MOUNTAIN ESTATES DRIVE COTTONWOOD HEIGHTS, UT 84121	82-2005583	501(C)(3)		11,912	FMV	HYGIENE	CRITICAL AMERICAN INDIAN NEEDS
ROSEBUD ELEMENTARY BOX 310 ROSEBUD, SD 57570	46-6003050	SCHOOL		36,209	FMV	SCHOOL SUPPLIES, BOOTS AND SHOES, CLOTHING	CRITICAL AMERICAN INDIAN NEEDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NAVAJO NATION PO BOX 7740 WINDOW ROCK, AZ 86515	86-0092335	501(C)(3)	91,394	0			WATER PROJECT

Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2019
Department of the Treasury Internal Revenue Service	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization AMERICAN INDIAN YOUTH RUNNING STRONG		Employer identification number 54-1594578

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
☐ Travel for companions	☐ Payments for business use of personal residence		
☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?		2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
☐ Compensation committee	☐ Written employment contract		
☐ Independent compensation consultant	☒ Compensation survey or study		
☐ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AMERICAN INDIAN YOUTH RUNNING STRONG

Employer identification number
54-1594578

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		726,102	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	9	1,004,636	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (SCHOOL SUPP.)	X	3	227,720	FMV
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

No

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 51227J

Schedule M (Form 990) (2019)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2020.
PART I, LINE 32B:	ALL OFFERED GIFTS ARE REVIEWED UNDER OUR GIFT ACCEPTANCE POLICY PRIOR TO ACCEPTANCE.

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. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047 2019 Open to Public Inspection
Department of the Treasury Name of the organization AMERICAN INDIAN YOUTH RUNNING STRONG		Employer identification number 54-1594578

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:	SAFE AND WARM HOMES. RUNNING STRONG IS COMMITTED TO PROVIDING SAFE ENVIRONMENTS FOR NATIVE FAMILIES, INCLUDING THEIR OWN HOMES. WE SUPPORTED THESE EFFORTS WITH OUR PROGRAM PARTNER SACRED HEALING CIRCLE TO PROVIDE EMERGENCY HOME REPAIRS ON PINE RIDGE RESERVATION FOR FAMI LIES WITH ELDERS AND SMALL CHILDREN WHO ARE IN MOST NEED (150 PEOPLE WERE SERVED, 75 OF TH EM WERE CHILDREN). RUNNING STRONG ALSO PARTNERED WITH THE OGLALA SIOUX TRIBE'S PARTNERSHIP FOR HOUSING TO REPAIR DAMAGE IN THE TRIBAL OFFICE, RESTORED HEAT TO A HOUSE WITH 1 INFANT AND 1 TEEN OCCUPANT FOR A WORKING MOTHER, AND REPAIRED WATER DAMAGE UNTIL COVID PRECAUTIO NS STOPPED WORK UNTIL IT COULD BE DONE SAFELY. HOMES THAT WERE REPAIRED HAD PREVIOUSLY OFF ERED DANGEROUS LIVING SITUATIONS FOR ELDERLY INDIVIDUALS AND SMALL CHILDREN. WE WERE ABLE TO PROVIDE WORKING OPPORTUNITIES FOR COMMUNITY MEMBERS AND PROVIDE RELIEF IN MANY SITUATIO NS WHERE THE TRIBE WAS UNABLE TO MAKE THE REPAIRS. WINTERS ON THE PINE RIDGE INDIAN RESERV ATION CAN BE BRUTAL WITH WINDCHILL TEMPERATURES AS LOW AS 40 DEGREES BELOW ZERO. IT'S DANG EROUS COLD. TO HELP STRETCH DOLLARS DURING THIS CRITICAL TIME, RUNNING STRONG MATCHES OGLA LA FAMILIES 1:1 FOR A \$200 TOTAL MATCH TOWARDS THEIR HEATING BILLS. THIS YEAR'S EMERGENCY HEAT MATCH ON PINE RIDGE PROVIDED HEATING ASSISTANCE TO 1,081 FAMILIES (8,875 INDIVIDUALS, 4,442 OF WHOM ARE CHILDREN. RUNNING STRONG IS PROUD TO MATCH \$100 PER FAMILY) IN JANUARY (CALLED "THE HARDEST MONTH" BY ONE OF OUR PINE RIDGE FIELD STAFF).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BRYAN L. KRIZEK, PRESIDENT/CEO AND PAUL E. KRIZEK, VICE PRESIDENT/GENERAL COUNSEL HAVE A FAMILY RELATIONSHIP. HOWEVER, THEY ARE NOT BOARD MEMBERS NOR COMPENSATED BY AMERICAN INDIAN YOUTH RUNNING STRONG.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B	RUNNING STRONG DOES NOT HAVE A COMMITTEE THAT ACTS ON BEHALF OF THE GOVERNING BODY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE INTERNAL REVENUE SERVICE FORM 990 IS PREPARED BY A FIRM OF CERTIFIED PUBLIC ACCOUNTANTS WITH EXPERTISE IN TAX AND AUDIT ISSUES RELATED TO TAX-EXEMPT ORGANIZATIONS. THE DRAFT FORM 990 IN DRAFT FORM IS SENT TO ALL MEMBERS OF THE BOARD OF DIRECTORS AND OFFICERS. THE DIRECTORS AND OFFICERS ARE INSTRUCTED TO SEND THEIR QUESTIONS, COMMENTS, AND SUGGESTIONS DIRECTLY TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE, STAFF AND THE AUDITOR, THEN MAKE A FINAL REVIEW OF THE DRAFT FORM 990. THE AUDIT COMMITTEE ADDRESSES ANY CONCERNS AND RESPONDS TO THE COMMENTS OF DIRECTORS AND OFFICERS PRIOR TO SUBMISSION OF THE FEDERAL FORM 990 TO THE INTERNAL REVENUE SERVICE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	RUNNING STRONG HAS ADOPTED A DETAILED WRITTEN CONFLICT OF INTEREST POLICY WHICH DEFINES CONFLICTS OF INTEREST AND REQUIRES OFFICERS, DIRECTORS, AND KEY EMPLOYEES AFFIRMATIVELY AND PROMPTLY TO DISCLOSE ALL AND ANY POTENTIAL CONFLICTS. COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY IS MANDATORY, REQUIRING ALL PERSONS SUBJECT TO THE CONFLICT OF INTEREST POLICY TO ANNUALLY SIGN A STATEMENT AFFIRMING THAT THEY ARE FAMILIAR WITH THE TERMS OF THE POLICY. THE POLICY REQUIRES ALL PERSONS SUBJECT TO THE POLICY TO PROVIDE ANNUALLY WRITTEN RESPONSES TO A QUESTIONNAIRE ENTITLED "CONFLICT OF INTEREST DISCLOSURE STATEMENT." ALL PERSONS SUBJECT TO THE CONFLICT OF INTEREST POLICY ARE OBLIGATED BY THE POLICY TO PROMPTLY INFORM THE CHAIR OF THE BOARD OF DIRECTORS OF ANY MATERIAL CHANGE THAT DEVELOPS WITH REGARD TO THEIR DISCLOSURE STATEMENT WHICH IS DISTRIBUTED TO DIRECTORS AND OFFICERS AT THE ANNUAL MEETING OF THE BOARD OF DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS IS GUIDED IN TERMS OF DETERMINING APPROPRIATE, FAIR AND REASONABLE COMPENSATION BY WRITTEN COMPENSATION GUIDELINES. THESE GUIDELINES WERE ADOPTED BY THE BOARD OF DIRECTORS TO ESTABLISH A PROCEDURE WHEREBY COMPENSATION IS ASSESSED IN TERMS OF RELEVANT MARKET-BASED CONDITIONS. THE COMPENSATION GUIDELINES ARE BASED ON PROCEDURES SET FORTH IN THE TREASURY REGULATION INTERPRETING INTERNAL REVENUE CODE SECTION 4958. PURSUANT TO THE COMPENSATION GUIDELINES, THE BOARD OF DIRECTORS REVIEWS APPROPRIATE COMPARABILITY SURVEYS WHICH PRESENT THE COMPENSATION DATA OF OTHER TAX-EXEMPT ORGANIZATIONS WITH SIMILAR MISSIONS AND REVENUES, TO ASSESS WHAT IS ORDINARY AND REASONABLE IN TERMS OF THE RELEVANT MARKET FOR COMPENSATION. THE DATA INCLUDED IN THE COMPARABILITY SURVEYS COMES FROM NUMEROUS SOURCES, SUCH AS ASSOCIATION SURVEYS AND CONSULTANT RESEARCH STUDIES. THE DATA IS FOCUSED ON COMPARABLE TAX-EXEMPT ORGANIZATIONS LOCATED WITHIN THE GREATER WASHINGTON, DC METROPOLITAN AREA.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	RUNNING STRONG MAKES PUBLICLY AVAILABLE ON ITS WEBSITE THE MOST RECENT AUDITED FINANCIAL STATEMENTS FOR THE PRECEDING THREE YEARS AS WELL AS PROVIDING A LINK TO THE GUIDESTAR'S WEBSITE, WHICH POSTS FORMS 990 FOR THE THREE PRECEDING YEARS. UPON REQUEST, RUNNING STRONG ALSO MAKES AVAILABLE COPIES OF ITS ARTICLES OF INCORPORATION, BYLAWS, THE CONFLICT OF INTEREST POLICY, AND COMPENSATION GUIDELINES.

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493311007900	
SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships				OMB No. 1545-0047
					2019
	▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.				Open to Public Inspection
Department of the Treasury Internal Revenue Service					
Name of the organization AMERICAN INDIAN YOUTH RUNNING STRONG				Employer identification number 54-1594578	

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
See Additional Data Table							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

Yes

1n

Yes

1o

Yes

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2019

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 54-1594578

Name: AMERICAN INDIAN YOUTH RUNNING STRONG

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
8301 RICHMOND HIGHWAY 100 ALEXANDRIA, VA 22309 54-1594577	CHARITABLE	VA	501(C)(3)	LINE 7	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 900 ALEXANDRIA, VA 22309 54-1884868	CHARITABLE	VA	501(C)(3)	LINE 7	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 300 ALEXANDRIA, VA 22309 54-1884520	CHARITABLE	VA	501(C)(3)	LINE 7	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 400 ALEXANDRIA, VA 22309 54-1609844	CHARITABLE	VA	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 999 ALEXANDRIA, VA 22309 52-1394775	CHARITABLE	VA	501(C)(3)	LINE 7	N/A		No
8301 RICHMOND HIGHWAY 705 ALEXANDRIA, VA 22309 54-1922277	CHARITABLE	VA	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HGHWY 710 ALEXANDRIA, VA 22309 54-1779171	CHARITABLE	KS	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 745 ALEXANDRIA, VA 22309 54-1990752	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 755 ALEXANDRIA, VA 22309 54-2041804	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 800 ALEXANDRIA, VA 22309 54-2041807	CHARITABLE	VA	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 450 ALEXANDRIA, VA 22309 71-1031988	CHARITABLE	VA	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 600 ALEXANDRIA, VA 22309 54-1748859	CHARITABLE	VA	501(C)(3)	LINE 12A, I	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 764 ALEXANDRIA, VA 22309 46-1511494	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 768 ALEXANDRIA, VA 22309 46-3979740	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 770 ALEXANDRIA, VA 22309 81-0850789	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 460 ALEXANDRIA, VA 22309 81-1158715	CHARITABLE	VA	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 774 ALEXANDRIA, VA 22309 81-4283891	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 775 ALEXANDRIA, VA 22309 82-0955164	CHARITABLE	AZ	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY 784 ALEXANDRIA, VA 22309 82-2442874	CHARITABLE	VA	501(C)(3)	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No
8301 RICHMOND HIGHWAY ALEXANDRIA, VA 22309 83-2720270	CHARITABLE	VA	501(C)(3) - CHARITAB	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
8301 RICHMOND HIGHWAY ALEXANDRIA, VA 22309 83-3955056	CHARITABLE	VA	501(C)(3) - CHARITAB	LINE 10	CHRISTIAN RELIEF SERVICES CHARITIES INC		No