Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

<u> </u>	For the	2023 calendar year, or tax year beginning and ending	10.00		
В	Check if ap	plicable: C Name of organization		D Employ	er identification number
	Address ch	YOUTH ARTS COLLECTIVE INC	50.000 PM 100 PM		
	Name char	Doing business as		**-*	***6059
\equiv		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		ne number
	Initial return Final return			831-	·375-9922
	terminated				
	Amended r	MONTERBY CA 93940		G Gross re	ceipts \$ 446,632
$\overline{\Box}$	Application	F Name and address of principal officer.	H(a) Is this a gr	nun rehim for :	subordinates? Yes X No
ш	Ahrena	TODE VALUE OURKED	rital is bill a gir	70 10 Will 10 1	
		506 SAN MIGUEL AVE	H(b) Are all sub		100 Ft 02 500
		SALINAS CA 93901	If "No,"	" attach a list	See instructions
<u></u>	Tax-exem	npt status: X 501(c)(3) 501(c) () (insert no.) 4947(e)(1) or 527			
<u>J</u>	Website:		H(c) Group exe	mption numb	er
100000		rganization X Corporation Trust Association Other	Year of formation: 2	000	M State of legal domicile: CA
	art l	Summary			
	1 E	Briefly describe the organization's mission or most significant activities:			
8		EDUCATION: AFTER SCHOOL ART INSTRUCTION		22 22 22 22	
au					
e.					
Š	2 (Check this box if the organization discontinued its operations or disposed of more than 2	5% of its net asset	s.	* • • • • • • • • • • • • • • • • • • •
8		Number of voting members of the governing body (Part VI, line 1a)			7
Sa	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	0
V.	5 7	Fotal number of individuals employed in calendar year 2023 (Part V, line 2a)		5	5
CE		Total number of volunteers (estimate if necessary)		ا م ا	0
•	60,000	Total unrelated business revenue from Part VIII, column (C), line 12		1 _ 1	0
		Net unrelated business taxable income from Form 990-T, Part I, line 11		· · ·	0
	 		Prior Yea		Current Year
Ф	8 (Contributions and grants (Part VIII, line 1h)	39:	1,972	415,201
Ž	9 F	Program service revenue (Part VIII, line 2g)	9	472	9,586
e e	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		102	111
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9	,128	19,185
	1000000	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	410	674	444,083
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		750	0
		Benefits paid to or for members (Part IX, column (A), line 4)		_	0
c)		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	210	,148	199,120
Se		Professional fundraising fees (Part IX, column (A), line 11e)	16	,497	11,459
죑		Total fundraising expenses (Part IX, column (D), line 25) 12,444			
ŭ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	170	745	229,125
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	400	,140	439,704
	11441200	Revenue less expenses. Subtract line 18 from line 12	10	,534	4,379
5			Beginning of Curr	\longrightarrow	End of Year
S	20 1	Total assets (Part X, line 16)	368	,960	380,351
Net Assets	21 7	Total liabilities (Part X, line 26)		469	7,481
2	∄ 22 N	Net assets or fund balances. Subtract line 21 from line 20	368	491	372,870
1000	art II	Signature Block			
1	Inder per	nalties of perjury. I declare that I have examined this return, including accompanying schedules and state	ments, and to the be	st of my kn	owledge and belief, it is
tı	rue, corre	ect, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowledge). 	
Si	gn	Signature of officer		Date	
	ere	JESSE VALDEZ JUAREZ DIRECTOR			
•		Type or print name and title			
_	-	Print/Type preparer's name Preparer's signature	Date	Check	if PTIN
Pa	id	DAVID HEINSTADT, EA	05/01/	24 self-em	ployed ******
1980	eparer	Firm's name THE INCOME STATEMENT	Fi	m's EIN	**-***0714
	e Only	17557 VIERRA CANYON RD			
	1997.	DRIMEDALE CA 93907	Pt	ione no.	831-663-6796
140	v the ID	S discuss this return with the preparer shown above? See instructions	D-0		Yes No
	-	ork Reduction Act Notice, see the separate instructions.		1	Form 990 (2023)
DA		IAIN LANGONAN LIA ILANAA) aan ma naharan mamminin.			

om 990 (2023) YOUTH ARTS CO	OLLECTIVE INC	**-***6059	Page 2
Part III Statement of Program	m Service Accomplishment	S	
Check if Schedule O c	contains a response or note to	any line in this Part III	<u></u>
1 Briefly describe the organization's mis EDUCATION: AFTER SCH		ON	
PDOCKLION: WEIPK BCL	TOOL AKT THEIROCT		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•• •• •• •• •• •• •• •• •• •• •• •• ••
·			
2 Did the organization undertake any sig	gnificant program services during th	e year which were not listed on the	
prior Form 990 or 990-EZ?		, , , , , , , , , , , , , , , , , , , ,	Yes X No
If "Yes," describe these new services			
3 Did the organization cease conducting	g, or make significant changes in ho	w it conducts, any program	<u> </u>
services?			Yes X No
If "Yes," describe these changes on S			
		tits three largest program services, as measured by	
		eport the amount of grants and allocations to others,	
the total expenses, and revenue, if an	ny, for each program service reported		
	403,888 including gra	ints of \$) (Revenue \$	
WORKSHOPS INVOLVE ST AND DEVELOPE THEIR (TUDENTS IN MANY AROWN CREATIVITY.	T FORMS WHICH INSPIRE THE	M TO EXPLORE
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* ,.,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
*			
41 45 4		-tf.f.	
4b (Code:) (Expenses \$	including gra	ints of \$	
N/A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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		· · · · · · · · · · · · · · · · · · ·	
4c (Code:) (Expenses \$	including gra	nts of \$) (Revenue \$)
N/A			************
***************************************	****************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1 ,		***************************************	
6			
* ************************			
	,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	
	.,	***************************************	
* ***************************			
P			

*		**************************************	
•			
4d Other program services (Describe on (Expenses \$			

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, X assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 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 6 "Yes," complete Schedule D, Part I 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III 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 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 or in quasi-endowments? If "Yes," complete Schedule D, Part V 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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more X 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more X 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If X "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on X Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G. Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Form 990 (2023) YOUTH ARTS COLLECTIVE INC

33.7	intive Checklist of Required Schedules (Commuea)		Von	310
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		168	No
24	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	1		<u> </u>
43	organization's current and former officers, directors, trustees, key employees, and highest compensated			
		23	1	x
240	employees? If "Yes," complete Schedule J	1		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			ļ
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a		x
h	through 24d and complete Schedule K. If *No," go to line 25a	24b		
b				
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?	24d		
250	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	1		
25a		25a		X
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	100		
р	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?	25b		x
	If "Yes," complete Schedule L, Part I	200		
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%	26		x
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			
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	27		x
	persons? If "Yes," complete Schedule L, Part III			
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).	\$25.75.63d	1,4 (1,4%)	ud 0.03383 -
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a	1	X
tor	"Yes," complete Schedule L, Part IV	28b		X
þ	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		X
	"Yes," complete Schedule L, Part IV	29	1	$\frac{\ddot{x}}{x}$
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		х
	conservation contributions? If "Yes," complete Schedule M	31	-	$\frac{x}{x}$
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	32		x
	complete Schedule N, Part II	32	-	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		¥
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	34		x
	or IV, and Part V, line 1	35a	-	X
35a		33a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35b		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	350		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36		x
	related organization? If "Yes," complete Schedule R, Part V, line 2	30		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37	İ	¥
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	38	x	
164005700	19? Note: All Form 990 filers are required to complete Schedule O.	1 20	26	
	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u>, , , , , , , , , , , , , , , , , , , </u>	Yes	No
			143	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
þ	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	3356°3	X	M. M
100	reportable gaming (gambling) winnings to prize winners?	1C Sec		(2023)
		Fon	11 フラリ	(2023)

Form	990 (2023) YOUTH ARTS COLLECTIVE INC **	-***6	<u>059</u>			P	<u>age 5</u>
	t V Statements Regarding Other IRS Filings and Tax Compliance	e (continu	red)		a consistent	Yes	No
	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	<u> 5 </u>			
	If at least one is reported on line 2a, did the organization file all required federal employment		18?		2b	X	
	Did the organization have unrelated business gross income of \$1,000 or more during the year				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on		O,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature			ty over,			
	a financial account in a foreign country (such as a bank account, securities account, or other				4a	A 2 8 8 8 8	X
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and	Financial A	ccoun	ts (FBAR).		weeks	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax				5a	_	<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shell		ion?		5b_		<u>X</u>
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	3				
	organization solicit any contributions that were not tax deductible as charitable contribution		r : : > · •		6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such		ns or				
	gifts were not tax deductible?				6b	********	
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly for g	oods		323		
	and services provided to the payor?			******	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided	d?		*:/**:	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for	which it was	S				
	required to file Form 8282?				7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	l	7d				
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal			?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal be				7f		
g	If the organization received a contribution of qualified intellectual property, did the organization				7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the				7h		100000000
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund	d maintained	d by th	16			BeQ&
	sponsoring organization have excess business holdings at any time during the year?		r · :		8	3 (2:23)	
9	Sponsoring organizations maintaining donor advised funds.					d Amin	60 Web
а	Did the sponsoring organization make any taxable distributions under section 4966?				9a		_
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related p	erson?			9b	: 1 25.489	
10	Section 501(c)(7) organizations. Enter:		40-				
a	Initiation fees and capital contributions included on Part VIII, line 12	.,,,,,,,,,,	10a	<u> </u>			
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:		11a	1			
8	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources		110				
D			11b				
420	against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	6. 25.0		?	12a	i istavitutsi	
5365555	arms. The state of the second of the second interest and a branch as a company district the second		12b			, W. 12.	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
a	to the contract of the second testing and the second through the second through the contract of the second through the second testing of the second testin				13a		1
a	Note: See the instructions for additional information the organization must report on Sche	dule O.		**	W	3 (1 × 1) 3 (1 × 1)	
ь	Enter the amount of reserves the organization is required to maintain by the states in which						
-	the organization is licensed to issue qualified health plans		13b				
c			13c	 			
14a		?			14a		X
ь	tamen were to be a second and the se		ie O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000				· .		
- -	excess parachute payment(s) during the year?				15		X
	If "Yes," see instructions and file Form 4720, Schedule N.	114	* . *	****			
16	Is the organization an educational institution subject to the section 4968 excise tax on net	t investment	t incor	me?	16	J. 1887	X
10.5(H). T i	if "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage	in any activ	vities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?				. 17		
	If "Yes," complete Form 6069.						

Part VI

Form 990 (2023) YOUTH ARTS COLLECTIVE INC

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

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

<u>Sec</u>	tion A. Governing Body and Management		-		Yes	No
	Established according to the concepting body at the and of the tay year	1a	1 7			
12	Enter the number of voting members of the governing body at the end of the tax year	- ``				
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain on Schedule O.			1966 (1934) 1966 (1934) 1966 (1934)		
h	Enter the number of voting members included on line 1a, above, who are independent	1b	0			
р 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
-				2		X
2	any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct	.,		,		
3				3		x
4	supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed		• • • • • • • • •	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	X
5				6		X
72	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint			. ,		
7a	one or more members of the governing body?			7a		X_
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
þ	stockholders, or persons other than the governing body?			7b		X
Ω	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by t	he followi	ng:		
۰				8a	X	
a	The governing body? Each committee with authority to act on behalf of the governing body?			8b	Х	
b	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
3	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		, ,	. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte	rnal R	Revenue	Code.)		\$6 AS
200	tion D. I onoice (Time Coetton D requeste minimum and property and pro				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	, , , , , , ,				
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	g the fo	m?	11a	X	
b	and the Cally and the Cally are and the the economization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	*		12a	Х	
b	the second state of the second less ampleages required to disclose applicably interests that could give ris	se to co	onflicts?	12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
•	describe on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?		1	13		X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval by					
.505	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	ļ	X
b	Other officers or key employees of the organization			15b		X_
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
11-11-11-11-11-11-11-11-11-11-11-11-11-	with a taxable entity during the year?	.,,,,,,		16a	(0.42.212	X
ь	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?	<u> </u>	<u> </u>	16b		92
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed CA	,			,	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section	501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest po	olicy,			
	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 rec	ords.				
J.	ESSE VALDEZ JUAREZ 506 SAN MIGUEL AVE	. -				
S	ALINAS CA 939	01		<u>831-37</u>	/5 - S	1922

Form 990 (2023) YOUTH ARTS COLLECTIVE IN	Form 990 (2023)	YOUTH	ARTS	COLLECTIVE	INC
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

(B)			(0	;}			l l		
Average hours per week	offi	c, unle	ss per	tion more t rson it rector	han on s both s /trustee	e) au	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the
hours for related organizations below dotted line)	ndividual trustee or director	nstitutional trustee	Micer	ey employee	lighest compensated mployee	ormer	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	$ _{\mathbf{x}}$		x				65,000	0	
	1							-	
25.00			Y				65.000	0	
1 0.00	A	 	-	_					
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10.00									
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<mark> , , ,</mark>									
	+	†	1	-	\Box				
	(list any hours for related organizations below dotted line) AREZ 25.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(list any hours for related organizations below dotted line) AREZ 25.00 0.00 X 10.00 X 10.00 X 10.00 X 10.00 0.00 X	(list any hours for related organizations below dotted line) AREZ 25.00	(list any hours for related organizations below dotted line) AREZ 25.00 0.00 X X X 10.00 0.00 X X 10.00 0.00 X X (list any hours for related organizations below dotted line) AREZ 25.00 0.00 X 10.00 0.00 X 10.00 0.00 X 10.00 0.00	(list any hours for related organizations below dotted line) AREZ 25.00 0.00 X X 10.00 0.00 X X 10.00 0.00 X X X 0.00 X X X 0.00 X X X X	(list any hours for related organizations below dotted line) AREZ 25.00 0.00 X X 10.00 0.00 X 10.00	Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations below dotted line) Citis any hours for related organizations Citis any h	(list any hours for related organizations below dotted line) 1000	

m 990 (2023) YOUTH ART	Directors True	steer	· K	9V F	mol	Ovee	, ar	* * - * * *	Employees (continued)	<u>-</u>
Art VII Section A. Officers, (A) Name and title	(B) Average hours	(do	not o	Pos theck iss pe	C) ition more	than or is both a	1 0	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organization
	· • • • · · · · · · · · · · · · · · · ·									
· · · · · · · · · · · · · · · · · · ·								1		
*										
* ***										
	.,.,									
Subtotal						.,,,		150,393		
Total from continuation she							- 1	150,393		
Total (add lines 1b and 1c) Total number of individuals (in	cluding but not	imite	d to	thos	e lis	ted a	bove		<u> </u>	<u> </u>
reportable compensation from	the organization	n	0_				ALCON .			Yes
Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization line 1 for services rendered to the organization for services rendered to the organization and related on line 1 for services rendered to the organization.	complete Sche e 1a, is the sum nizations greater a receive or acc ganization? If	of rethan	J for port \$15 comp	suc able 50,00	com 00? i	dividu npens If "Ye: n from	alion ations," co	and other compensation of an and other compensation of an an and other schedule J for surplete Schedule J for surplete organization of an analysis and an an	from the ch	3 4
tion B. Independent Contracto Complete this table for your five	e highest some	Anen	ted	inde	nend	dent c	ontr	actors that received more	than \$100,000 of	
compensation from the organi	zation. Report c	ompe	ensa	tion	for t	he ca	lend	ar year ending with or with	nin the organization's tax y	ear.
Name and	(A) business address		_				<u></u>	Descrip	(B) otion of services	(C) Compensa
	<u></u>					-	_			
			<u>-</u> -							
							-			

Form 990 (2023) YOUTH ARTS COLLECTIVE INC

Par	t VI	Statemer Check if	nt of Rev	venue	ins a resnor	ise or note	to any line in thi	s Part VIII		
<u> </u>		Official			a respen	100 0. 11010	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512-514
হ ম	12	Federated campa	ians		1a					
ilar Amount		Membership dues	,		1b	23,029				
E S		Fundraising even			1c	-				
ari		Related organiza			1d	2,850				
Ē		Government grants (con			1e					
	f	All other contributions, g	ifts, grants,		AE	389,322				
		and similar amounts not Noncash contributions in			1f	309,322				
ontributions, ad Other Simi	_	lines 1a-1f			1g \$					
3 =	_ <u>h</u>	Total. Add lines	1a-1 <u>f</u>	<u> </u>	<u> </u>	<u> </u>	415,201			
Ţ						Business Code		0.506		
ც	2a	ART WORK SA	LES			611600	9,586	9,586		
Program service Revenue	b							<u> </u>		
	C				.,,,,,,,,,,,					
Regard	d									
2	е						<u> </u>			
		All other program					9 586			
-		Total. Add lines			10 10 10	_116/90	3,300		***************************************	
1	3	Investment incor		ng aiviaena:	s, interest, and		111			111
		other similar am	•		hond proceed					
-	4	Income from inve	estment of	tax-exempt	Dolla proceed	5				
	5	Royalties		(i) Real		Personal				
- 1	6.	Cross roots	62	(1) 1(04)						
	1977/17/20	Gross rents	6a							
		Less: rental expenses Rental inc. or (loss)	6c							
		Net rental incom			200.002	42 2 4 4				
		Gross amount from	1	(i) Securities	(ii) Other				
		sales of assets other than inventory	7a	1000	2000					
<u>.</u>	b	Less: cost or other		· · · · · ·		Elsy				
enu	·	basis and sales exps.	7b							
Še	C	Gain or (loss)	7c_							
er F		Net gain or (loss	s)		<u> </u>					
St.	8a	Gross income from	n fundraising	events						
		(not including \$,						
	ı	of contributions reg	ported on line	9	1					
		1c). See Part IV, lii	ne 18		8a	21,734				
		Less: direct exp				2,549	19,18			16,24
	0.000	Net income or (1			events	<u></u>	19,10			
	9a	Gross income fr								
		activities. See P		19	9a		-			
		Less: direct exp		,	9b	<u> </u>				
		Net income or (VILLES					
	10a	Gross sales of i			10a					
		returns and allo			10b	· · ·	7			
	ם أ	Less: cost of go Net income or (loce\ from :	eales of invi						
	-	MAT HICOLINA OF (ivaaj nuin i	OGIOG OLINE		Business Cod	e			
STIC	44-	ę.								
Tue	11a				.,					
Miscellan Revent	٥			*******						
Se Re	تا نہ	All other revenu								NULL SUPPLEMENTATIONS OF SOME SOME AND SOME SOME
Σ		Total. Add lines								
		Total revenue.					444,08	3 9,58	6	0 16,35 Form 990 (20

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 **(8)** Do not include amounts reported on lines 6b, 7b, (A) (C) (D) Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 150,393 137,309 13,084 trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 18,498 16,889 Other salaries and wages 1,609 Pension plan accruals and contributions (include 6,000 6,000 section 401(k) and 403(b) employer contributions) 9,890 10,832 942 Other employee benefits 12,231 1,166 13,397 Payroll taxes Fees for services (nonemployees): a Management 10,132 10,132 **b** Legal c Accounting 3,230 308 3,538 d Lobbying 11,459 11,459 e Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion Office expenses 13 Information technology Royalties 43,200 43,200 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates 21 152 152 Depreciation, depletion, and amortization 1,672 1,605 3,277 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 34,360 34,360 PROGRAM ASSISTANT/MENTOR 26,044 26,044 VISITING ARTIST & WRITERS 21,621 21,621 SOCIAL MEDIA ASSISTANT 21,621 21,621 STUDIO ASSISTANT 59,537 985 4,658 65,180 All other expenses 439,704 12,444 403,888 23,372 25 Total functional expenses. Add lines 1 through 24e 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)

Form 990 (2023) YOUTH ARTS COLLECTIVE INC Part X Balance Sheet **-***6059

	Check if Schedule O contains a response o			(A)		(B)				
-				Beginning of year	55 J. V.	End of year				
1	Cash—non-interest-bearing			260,761	1_	272,135				
2	Savings and temporary cash investments			100,301	2	100,412				
3	Pledges and grants receivable, net				3					
- 4	Accounts receivable, net				4	- · · · · · · · · · · · · · · · · · · ·				
	Loans and other receivables from any current or f	ormer officer, direct	or,							
	trustee, key employee, creator or founder, substa									
- 1	controlled entity or family member of any of these				5					
6	Loans and other receivables from other disqualifie		ed							
22	under section 4958(f)(1)), and persons described		2000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6					
19 7	Notes and loans receivable, net	***************************************		7						
۶ کې	Inventories for sale or use		,		8					
9	Prepaid expenses and deferred charges				9					
10	Da Land, buildings, and equipment: cost or other		,							
	basis. Complete Part VI of Schedule D	10a	21,501							
	b Less: accumulated depreciation	10b	21,095		10c	406				
11	, , , , , , , , , , , , , , , , , , , ,		22,000		11					
12	7 7	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			12					
13		***************************************			13					
14	P. 23. C.			7,340		7,398				
15				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15					
16		ino 22\		368,960		380,351				
17		IIII 33)		469		7,481				
18			.,		18					
19	* * * * * * * * * * * * * * * * * * * *			19						
20				20						
10.50	*									
2	•		, , , , , , , , , , , , , , , , , , , , , ,		21					
Set 2			2504							
	trustee, key employee, creator or founder, substa-				22	। जिल्ला कुर्ता के कि				
E .	controlled entity or family member of any of these				23					
23					24	<u> </u>				
24										
25	parties, and other liabilities not included on lines 1		650000							
		7-24). Complete i a			25					
100	of Schedule D			469	26	7,481				
26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check									
တ္က	10 0	X 11010								
၌ ္	and complete lines 27, 28, 32, and 33.			365,991		352,870				
Balance 28	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	2,500		20,000					
E 28		9 shack hara								
Š	Organizations that do not follow FASB ASC 95	o, check hale [
片	and complete lines 29 through 33.				29					
29				·-·	10.0	 				
30				,	30	 				
¥ 31		orne, or other tungs		368,491	31	372,870				
₹ 32										
¯ 33	Total liabilities and net assets/fund balances		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	368,960	33	380,351				

Form 990 (2023)

~~~~	990 (2023) YOUTH ARTS COLLECTIVE INC **-***6059			Paç	_{je} 12
	* XI Reconciliation of Net Assets	255 51 17			
5 v. 763	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4.	14,	183
	Total expenses (must equal Part IX, column (A), line 25)	2_		39,7	_
	Revenue less expenses. Subtract line 2 from line 1	3		4,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	68,4	191
	Net unrealized gains (losses) on investments	5		_	
	Donated services and use of facilities	6		9	
	Investment expenses	7			
	Prior period adjustments	8			
	Other changes in net assets or fund balances (explain on Schedule O)	9			
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		3'	72,8	270
	32, column (B))	10		4	5 / 0
Pa	rt XII Financial Statements and Reporting				\Box
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			Yes	No
2	Schedule Q.		2a	ari er deser b	X
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				
b	Were the organization's financial statements audited by an independent accountant?		2b		
	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				
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?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a_		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form 990 (2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

2023

Open to Public Inspection

Employer identification number

		YOUTH ARTS C	OLLECTIVE	INC			**-**	6059					
Part	Reaso				must c	omplete	this part.) See instructi	ons.					
		a private foundation becaus	MAN 15/01 12	10107 in 10709									
1		nvention of churches, or ass											
2		cribed in section 170(b)(1)(
3	A hospital or	a cooperative hospital service	ce organization desc	cribed in se d	tion 170	(b)(1)(A)(iii).						
4 📗	A medical res	search organization operated	d in conjunction with	a hospital o	described	in sectio	n 170(b)(1)(A)(iii). Enter the !	nospital's name,					
	city, and state	9: 				or 1070101 of 10							
5	An organizati	on operated for the benefit of	of a college or unive	rsity owned	or operate	ed by a g	overnmental unit described in						
		b)(1)(A)(iv). (Complete Part											
6		te, or local government or g											
7 📋		on that normally receives a section 170(b)(1)(A)(vi). (Co		s support fro	om a gove	ernmental	unit or from the general publi	С					
8 📙		trust described in section 1											
9 [_]							unction with a land-grant colle ty, and state of the college or	ge					
10 X	receipts from support from		npt functions, subjected unrelated busines	ct to certain o	exception come (les	s; and (2) ss section)\$\$					
11 🗌	. –	ion organized and operated											
12							ns of, or to carry out the purpo						
	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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.												
20													
а	the supp	supporting organization oper orted organization(s) the pov ig organization. You must c	wer to regularly appo	oint or elect a	a majority		rganization(s), typically by givi ectors or trustees of the	"'9					
b						its suppoi	ted organization(s), by having						
	control o	r management of the supportion(s). You must complete	rting organization ve	sted in the s	ame pers	ons that	control or manage the support	ed					
c	Type III 1		supporting organizati	ion operated	l in conne Part IV,	ction with Sections	, and functionally integrated w A, D, and E .	rith,					
d	Type III i	non-functionally integrated	d. A supporting orga	nization ope	rated in c	onnection	with its supported organization with its supported organization requirement and an attentiven						
	165 N 17 N 17 N 1	ent (see instructions). You r											
•	Check th	is box if the organization rec	eived a written dete	rmination fro	m the IR	S that it is	a Type I, Type II, Type III						
		illy integrated, or Type III nor nber of supported organizati		atea support	ing organ	ization.							
g		ollowing information about th		zation(s).			**********						
(I) Nac	ne of supported	(II) EIN	(lii) Type of organ (described on line	nization	(iv) is the o	rganization or governing	(v) Amount of monetary support (see	(vi) Amount of other support (see					
			above (see instru	ictions))	1	nent?	instructions)	instructions)					
-					Yes	No							
(A)													
(B)						NO. 2020/2010 20							
(C)													
(D)													
(E)													
Tatal								 					
Total For Pape	rwork Reduction	on Act Notice, see the Instruct	tions for Form 990 or	r 990-EZ.	a service exercises			Schedule A (Form 990) 2023					

Schedule A (Form 990) 2023

YOUTH ARTS COLLECTIVE INC

Pa	Complete only if you che Part III. If the organization	cked the box or	n line 5. 7. or 8	of Part I or if the	ne organization	tailed to quality	under
Sec	tion A. Public Support	Tails to quality	dildoi mo to to				
$\overline{}$	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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	ļ					
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		W. William				
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		ļ				
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc					12	
13	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>		<u> </u>	
Se	ction C. Computation of Public S					1	
14	Public support percentage for 2023 (line						<u>%</u>
15	Public support percentage from 2022 Sc					15	
16a	7.5				is 33 1/3% of more	, check this	
Ţ.	box and stop here. The organization qua					more check	
b	33 1/3% support test — 2022. If the org						\Box
4 -	this box and stop here. The organization 10%-facts-and-circumstances test — 2						Ш
17a	10%-racts-and-circumstances test — . 10% or more, and if the organization me						
	Part VI how the organization meets the f						
	organization			y	F	·	
	AIRMINERAL ICCIDENTIFICATION OF THE PROPERTY O	*******					· · · · · · · · · · · · · ·

10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain

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

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

organization ______

Schedule A (Form 990) 2023

Part III Support

COULD ARTS COULDECTIVE THE

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.)

Sect	tion A. Public Support				10 <u>1000</u>		
_	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	361,664	249,869	379,626	391,972	415,201	1,798,332
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	63,955			8,618	15,079	126,292
3	Gross receipts from activities that are not an unrelated trade or business under section 513			22,211	12,400	16,241	50,852
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	425,619	281,959	408,387	412,990	446,521	1,975,476
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						1,975,476
800	tion B. Total Support						1,3/3/4/0
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Calei	Amounts from line 6	425,619					1,975,476
		723,013		100,007	, , , , , , , , , , , , , , , , , , ,		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					111	111
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b					111	111
11	Net income from unrelated business activities not included on 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.)	425,619	281,959	408,387	412,990	446,632	1,975,587
14	First 5 years. If the Form 990 is for the or				as a section 501(c))(3)	
•	organization, check this box and stop her						.,,,
Sec	tion C. Computation of Public Su	upport Percen	tage				
15	Public support percentage for 2023 (line 8	3, column (f), divide	ed by line 13, colur	nn (f))	********	15	99,99%
16	Public support percentage from 2022 Sch			<u> </u>		16	100.00%
Sec	ction D. Computation of Investme			<u></u>			
17	Investment income percentage for 2023 (line 10c, column (f), divided by line 1	3, column (f))		17	<u>%</u>
18	Investment income percentage from 2022						
19a							$\overline{\mathbf{X}}$
	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests — 2022. If the org						
	line 18 is not more than 33 1/3%, check the						
20	Private foundation. If the organization di	d not check a box	on line 14, 19a, or	19b, check this bo	ox and see instruct	ions	

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

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

N/-32	Yes	No
1		y,,
2	A 200 A	
3a		
2020 S		
3b		
OD.		37,333,333
		2000
3c		
4a	<u></u>	
4b		
		
4c		
5a		
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5b	 	
5c	<u> </u>	<u></u>
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Contract Contract	1	
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9a		
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9b 9c		
9b 9c 10a		
9b 9c		
9b 9c 10a		

Schedu	ale A (Form 990) 2023 YOUTH ARTS COLLECTIVE INC	**-***6059		Page 5
Par	t IV Supporting Organizations (continued)			
150 150			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	2000 (100) (1000 (1000 (1000 (100) (1000 (1000 (1000 (100) (1000 (1000 (100) (1000 (1000 (100) (1000 (1000 (100) (100) (1000 (100) (100) (1000 (100) (1000 (100) (1000 (100) (100) (1000 (100) (100) (1000 (100) (100) (1000 (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (100) (
а				
•			**************************************	
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b	Territorio de Caracidado.	6370-060-6770-00
C	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	ion B. Type I Supporting Organizations			45
			Yes	No
1	Did the governing hady, members of the governing hady, officers acting in their official capacity, or members t	in of one or		
•	Did the governing body, members of the governing body, officers acting in their official capacity, or membersh	00000000		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization	on(s)		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than o	ne supported		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated	among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			_
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
-	supervised, or controlled the supporting organization.			
Sect	ion C. Type II Supporting Organizations	1000 2000 		·
		1007000000000	Yes	No_
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	2 (c. 1. 15) (c. 15) (c. 15)	en andrews and an enter-
Secti	ion D. All Type III Supporting Organizations			
3600	ion D. An Type in Supporting Organizations	5 SA SA S	Yes	No
920				
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			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	B		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization((s). 2		
_				
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion 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 (s	see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental	l entity (see instructions)		
,	Activities Test. Answer lines 2a and 2b below.		Yes	No
4	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	\$200,000 \$200,000		
а	Dig substantially all of the organization's activities during the tax year encountries "then in Part VI identify			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	ENVIOLENCE (FILES	ana an
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
_	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
		2b		
380-28	have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		area e e e e e e e e e e e e e e e e e e	
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		\$2000000000000000000000000000000000000
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of ea			
10,074	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
		Schedule A	. (Form 9	90) 2023

6_	Multiply line 5 by 0.035.			
7	Recoveries of prior-year distributions	7		<u>.</u>
8	Minimum Asset Amount (add line 7 to line 6)			
Sect	ion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5_		<u> </u>
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6_		<u>. </u>
7	Check here if the current year is the organization's first as a non-functionally in	tegrated Type	III supporting organization	

Acquisition indebtedness applicable to non-exempt-use assets

Net value of non-exempt-use assets (subtract line 4 from line 3)

Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,

Subtract line 2 from line 1d.

(see instructions).

see instructions).

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Schedule A (Form 990) 2023

Schedule	A (Form 990) 2023 YOUTH ARTS COLL:	ECTIVE INC	**-**	**6	059 F	Page
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organiza	tions (continued)			
Section	on D - Distributions			2(35)	Current Year	N.
1	Amounts paid to supported organizations to accomplish exempt po	urposes		1		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Amounts paid to perform activity that directly furthers exempt purp					·
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purposes of s	supported organizations		3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required—provide	details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the organizations	anization is responsive		8		
	(provide details in Part VI). See instructions.		. <u> </u>		. <u>-</u>	
9	Distributable amount for 2022 from Section C, line 6		•	9		2,000
_10	Line 8 amount divided by line 9 amount			10	9	
		(i)	(ii)		(iii)	
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution	.	Distributable	
			Pre-2023		Amount for 2023	3 _
1_	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023					
	(reasonable cause required-explain in Part VI). See					
	instructions.			80 - X - Y		
3	Excess distributions carryover, if any, to 2023					******
a	From 2018					
	From 2019					
c	From 2020					
<u>d</u>	From 2021					
e	From 2022					
f	Total of lines 3a through 3e	2004046820000000000000000000000000000000				-14-1-1
100	Applied to underdistributions of prior years		ture en esta de la Porte d La recepción de la Porte d	0.640		
<u>h</u>	Applied to 2023 distributable amount					2000000000
	Carryover from 2018 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from					
-	Section D, line 7:			× (×)		
	Applied to underdistributions of prior years			1000		
	Applied to 2023 distributable amount					
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					0.0000000
0	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
′	and 4c.					
	Breakdown of line 7:					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					
	Excess from 2023					•••••

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Schedule A (For	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.)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

> Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

2023

QMB No 1545-0047

Open to Public

Schedule O (Form 990) 2023

Inspection Internal Revenue Service Employer identification number Name of the organization **-***6059 YOUTH ARTS COLLECTIVE INC FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 DIRECTORS REVIEW OF TAX RETURN PRIOR TO FILING FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY INTEREST REVIEWED ON WORK ORDER REQUEST. LINE 12A CONFLICT OF FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION FORM 990, PAGE 6, SECTION C, LINE 19: REQUESTERS ARE ASKED TO COME BY THE SCHOOL FOR COPIES FORM 990, PART IX, LINE 24E - OTHER EXPENSES DESCRIPTION FUNDRAISING MGT & GENERAL TOT/PROG SERVICE ARTIST IN RESIDENCE 17,232 DONOR DATABASE 8,810 UTILITIES 7,964 PROGRAM FOOD & REFRESHMEN 5,841 STAFF TRAINING 5,092 COMMISSION TO ARTISTS

4,418

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