

EXTENDED TO NOVEMBER 16, 2020

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Form **990**  
(Rev. January 2020)  
Department of the Treasury  
Internal Revenue Service

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

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

**2019**  
Open to Public Inspection

**A** For the **2019** calendar year, or tax year beginning and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>CRYSTAL PEAKS YOUTH RANCH, CO.</b>	<b>D</b> Employer identification number <b>91-1821187</b>
	Doing business as	<b>E</b> Telephone number <b>541-330-0123</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>19344 INNES MARKET ROAD</b>	<b>G</b> Gross receipts \$ <b>2,170,731.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>BEND, OR 97703</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>F</b> Name and address of principal officer: <b>KENNETH MEEDER</b> <b>SAME AS C ABOVE</b>		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.CRYSTALPEAKSYOUTH RANCH.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L</b> Year of formation: <b>1997</b> <b>M</b> State of legal domicile: <b>OR</b>		

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO PROVIDE A POSITIVE, SAFE, AND STRUCTURED EQUESTRIAN ENVIRONMENT FOR ALL CHILDREN.</b>
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>3</b> <b>5</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>4</b>
	<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a) <b>5</b> <b>27</b>
	<b>6</b> Total number of volunteers (estimate if necessary) <b>6</b> <b>320</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b> <b>-46,414.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 39 <b>7b</b> <b>-46,414.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) <b>1,571,217.</b> <b>Prior Year</b> <b>1,543,559.</b> <b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) <b>55,654.</b> <b>36,352.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>68,096.</b> <b>10,708.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>-17,665.</b> <b>-45,155.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>1,677,302.</b> <b>1,545,464.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>0.</b> <b>0.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>0.</b> <b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>802,471.</b> <b>805,124.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>0.</b> <b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>147,844.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>642,176.</b> <b>728,998.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>1,444,647.</b> <b>1,534,122.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 <b>232,655.</b> <b>11,342.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) <b>6,168,447.</b> <b>Beginning of Current Year</b> <b>6,223,269.</b> <b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26) <b>140,137.</b> <b>90,310.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 <b>6,028,310.</b> <b>6,132,959.</b>

**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.

<b>Sign Here</b>	Signature of officer <i>Kenneth Meeder</i>	Date <b>10/20/20</b>			
	<b>KENNETH MEEDER, CEO</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>RONALD S. BOYD</b>	Preparer's signature <b>RONALD S. BOYD</b>	Date <b>10/04/20</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00710287</b>
	Firm's name ▶ <b>KERNUTT STOKES, LLP</b>	Firm's EIN ▶ <b>93-0396435</b>	Firm's address ▶ <b>109 NW GREENWOOD AVENUE, SUITE 102</b> <b>BEND, OR 97703</b>		
Phone no. (541) <b>749-4020</b>					

Part III Statement of Program Service Accomplishments

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

X

1 Briefly describe the organization's mission:

CRYSTAL PEAKS YOUTH RANCH COMPANY'S PRIMARY EXEMPT PURPOSE IS TO PROVIDE A POSITIVE, SAFE, AND STRUCTURED EQUESTRIAN ENVIRONMENT FOR ALL CHILDREN, INCLUDING AT-RISK, DISABLED, AND DISADVANTAGED CHILDREN.

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 X

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 X

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 \$ 345,727. including grants of \$ ) (Revenue \$ )

CPYR STAFF COMPLETED 1,694 GENERAL SESSIONS IN 2019, WHICH INCLUDES THE FOLLOWING:

CPYR SERVED 174 FAMILIES WITH 296 CHILDREN AGES SIX-EIGHTEEN THROUGH ITS CORE SESSION PROGRAM.

414 "MENTOR" SESSIONS WERE OFFERED IN 2019. MENTOR SESSIONS DIFFER FROM REGULAR SESSIONS IN THAT ONE CONSISTENT STAFF WORKS WITH ONE CONSISTENT CHILD TO CREATE A DEEPER, MORE MEANINGFUL RELATIONSHIP OVER TIME. THESE CHILDREN ONLY SEE THEIR PREFERRED STAFF LEADER THROUGHOUT THE SESSION SEASON.

4b (Code: ) (Expenses \$ 384,140. including grants of \$ ) (Revenue \$ )

EQUINE RESCUE AND OUTREACH ACCOMPLISHMENTS DURING 2018:

CPYR CREATED A NEW STAFF POSITION, "EQUINE ASSISTANT", TO SUPPORT THE EQUINE MANAGER IN OVERSEEING CARE OF THE CPYR HERD. THIS POSITION OFFERS UP TO 36 HOURS A WEEK ASSISTANCE TO THE EQUINE MANAGER.

IN THE YEAR 2019, THE RANCH OFFERED A PROFESSIONAL INTERNSHIP TO ONE "EQUINE INTERN." THIS INTERN ASSISTED WITH HERD CARE, MANAGEMENT, AND TRAINING. THEY RECEIVED ONGOING EDUCATION AND EXPERIENCE AND PARTICIPATED IN OUR SESSION PROGRAM AS A SESSION LEADER.

CPYR RESCUED THREE "AT RISK" HORSES IN 2019. THEIR STORIES RANGE FROM

4c (Code: ) (Expenses \$ 294,507. including grants of \$ ) (Revenue \$ )

IN 2019, CPYR CONTINUED TO FOCUS ON GROWING ITS FAMILY SUPPORT PROGRAMS. AS A RESULT, FOOD, FINANCIAL ASSISTANCE, CLOTHING, BOOKS, TOYS, FUEL, TRANSPORTATION NEEDS, AND COMMUNITY CONNECTIONS WERE GIVEN TO LOCAL FAMILIES.

IN 2019, WE ALSO CONTINUED TO DEVELOP OUR VOLUNTEER PROGRAMS. WE HOSTED 68 VOLUNTEER GROUPS THAT CONSIST OF LOCAL, REGIONAL, AND INTERNATIONAL INDIVIDUAL, FAMILIES AND GROUPS. WITH THEIR DEDICATION TO SERVE CYPR IN THE DAY-TO-DAY TASKS, AS WELL AS BUILDING PROJECTS LIKE OUR NEWLY-COMPLETED REFUGE BARN, THEY WORKED A TOTAL OF 5,452 HOURS.

4d Other program services (Describe on Schedule O.)

(Expenses \$ 256,091. including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,280,465.

**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)? <i>If "Yes," complete Schedule A</i> .....	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		X
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? <i>If "Yes," complete Schedule C, Part III</i> .....		X
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? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
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? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
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? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a Did the organization maintain an office, employees, or agents outside of the United States? .....		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
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? <i>If "Yes," complete Schedule G, Part I</i> .....		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X



Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [ ]

Table with 3 columns: Question number, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, W-2G forms, and backup withholding.

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

		Yes	No
<b>2a</b>	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 27		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>2b</b>			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
<b>3a</b>			
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
<b>3b</b>			
<b>4a</b>	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)?		X
<b>4a</b>			
<b>b</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).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5a</b>			
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5b</b>			
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>5c</b>			
<b>6a</b>	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?		X
<b>6a</b>			
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?		X
<b>7a</b>			
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7b</b>			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7c</b>			
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7e</b>			
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7f</b>			
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>7h</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	13a	
<b>b</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	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
<b>15</b>	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 4720, Schedule N.	15	X
<b>16</b>	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	X

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

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

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **OR**
- 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     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 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 **►**  
**KENNETH MEEDER - 541-330-0123**  
**19390 INNES MARKET ROAD, BEND, OR 97703**









**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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>						
	<b>c</b> Fundraising events	<b>1c</b>	35,179.					
	<b>d</b> Related organizations	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	1,508,380.					
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 300,802.					
	<b>h</b> Total. Add lines 1a-1f			1,543,559.				
<b>Program Service Revenue</b>	<b>2 a</b> CLINICS & CONFERENCES	<b>Business Code</b>	900099	34,275.	34,275.			
	<b>b</b> REFUNDS		900099	2,077.	2,077.			
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b> All other program service revenue							
	<b>g</b> Total. Add lines 2a-2f			36,352.				
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			18,913.			18,913.
<b>4</b> Income from investment of tax-exempt bond proceeds								
<b>5</b> Royalties								
<b>6 a</b> Gross rents			(i) Real					
		<b>6a</b>	(ii) Personal	14,400.				
		<b>b</b> Less: rental expenses		59,706.				
<b>c</b> Rental income or (loss)			6c	45,306.				
<b>d</b> Net rental income or (loss)					-45,306.		-45,306.	
<b>7 a</b> Gross amount from sales of assets other than inventory			(i) Securities					
		<b>7a</b>	(ii) Other	499,003.	31,283.			
		<b>b</b> Less: cost or other basis and sales expenses		7b	513,866.	24,625.		
		<b>c</b> Gain or (loss)		7c	14,863.	6,658.		
<b>d</b> Net gain or (loss)					-8,205.	6,658.	-14,863.	
<b>8 a</b> Gross income from fundraising events (not including \$ 35,179. of contributions reported on line 1c). See Part IV, line 18								
	<b>8a</b>		1,259.					
	<b>b</b> Less: direct expenses		8b	0.				
<b>c</b> Net income or (loss) from fundraising events				1,259.		1,259.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19								
	<b>9a</b>							
	<b>b</b> Less: direct expenses		9b					
<b>c</b> Net income or (loss) from gaming activities								
<b>10 a</b> Gross sales of inventory, less returns and allowances								
	<b>10a</b>		25,962.					
	<b>b</b> Less: cost of goods sold		10b	27,070.				
<b>c</b> Net income or (loss) from sales of inventory				-1,108.		-1,108.		
<b>Miscellaneous Revenue</b>	<b>11 a</b>	<b>Business Code</b>						
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
	<b>e</b> Total. Add lines 11a-11d							
<b>12</b> Total revenue. See instructions				1,545,464.	43,010.	-46,414.	5,309.	

**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  X

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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	159,812.	159,812.		
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	520,002.	410,313.	42,859.	66,830.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits	57,631.	45,474.	4,750.	7,407.
<b>10</b> Payroll taxes	67,679.	53,403.	5,578.	8,698.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	38.	30.	3.	5.
<b>c</b> Accounting	287.	226.	24.	37.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	3,728.	2,942.	307.	479.
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	33,809.	26,677.	2,787.	4,345.
<b>12</b> Advertising and promotion	49.	39.	4.	6.
<b>13</b> Office expenses				
<b>14</b> Information technology	2,022.	1,595.	167.	260.
<b>15</b> Royalties				
<b>16</b> Occupancy	20,060.	15,828.	1,654.	2,578.
<b>17</b> Travel	34,102.	26,908.	2,811.	4,383.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	292.	230.	24.	38.
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	179,679.	165,021.	11,034.	3,624.
<b>23</b> Insurance	30,524.	24,085.	2,516.	3,923.
<b>24</b> 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.)				
<b>a</b> GENERAL SUPPLIES & EQUI	47,606.	37,564.	3,924.	6,118.
<b>b</b> FOOD & BEVERAGE	45,381.	35,809.	3,740.	5,832.
<b>c</b> POSTAGE & DELIVERY	35,258.	27,821.	2,906.	4,531.
<b>d</b> AUTO EXPENSES	34,644.	27,336.	2,855.	4,453.
<b>e</b> All other expenses SEE SCH O	261,519.	219,352.	17,870.	24,297.
<b>25</b> Total functional expenses. Add lines 1 through 24e	1,534,122.	1,280,465.	105,813.	147,844.
<b>26</b> 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 Sheet**

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

		(A) Beginning of year		(B) End of year
Assets	<b>1</b> Cash - non-interest-bearing .....	225,815.	<b>1</b>	17,642.
	<b>2</b> Savings and temporary cash investments .....	334,984.	<b>2</b>	358,333.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....		<b>4</b>	1,065.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	20,016.	<b>8</b>	17,108.
	<b>9</b> Prepaid expenses and deferred charges .....		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 5,807,669.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,048,958.	3,622,592.	<b>10c</b> 4,758,711.
	<b>11</b> Investments - publicly traded securities .....	1,049,477.	<b>11</b>	993,904.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	915,563.	<b>15</b>	76,506.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	6,168,447.	<b>16</b>	6,223,269.	
Liabilities	<b>17</b> Accounts payable and accrued expenses .....	69,790.	<b>17</b>	38,643.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	70,347.	<b>23</b>	51,667.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	140,137.	<b>26</b>	90,310.
Net Assets or Fund Balances	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	6,028,310.	<b>27</b>	6,132,959.
	<b>28</b> Net assets with donor restrictions .....		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
<b>32</b> Total net assets or fund balances .....	6,028,310.	<b>32</b>	6,132,959.	
<b>33</b> Total liabilities and net assets/fund balances .....	6,168,447.	<b>33</b>	6,223,269.	



**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,545,464.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,534,122.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,342.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,028,310.
5	Net unrealized gains (losses) on investments	5	59,638.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	33,669.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,132,959.

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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 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 Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2019)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2018 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2018.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2019.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2018.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



**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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	3480103.	1263688.	1074579.	1571217.	1543559.	8933146.
<b>2</b> 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 .....	53,958.	54,253.	84,630.	139,481.	70,231.	402,553.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....	3534061.	1317941.	1159209.	1710698.	1613790.	9335699.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						0.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						0.
<b>c</b> Add lines 7a and 7b .....						0.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						9335699.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>9</b> Amounts from line 6 .....	3534061.	1317941.	1159209.	1710698.	1613790.	9335699.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	70,125.	18,199.	23,324.	30,004.	18,450.	160,102.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....	1,589.					1,589.
<b>c</b> Add lines 10a and 10b .....	71,714.	18,199.	23,324.	30,004.	18,450.	161,691.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	3605775.	1336140.	1182533.	1740702.	1632240.	9497390.

**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**

<b>15</b> Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) .....	15	98.30 %
<b>16</b> Public support percentage from 2018 Schedule A, Part III, line 15 .....	16	97.84 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) .....	17	1.70 %
<b>18</b> Investment income percentage from 2018 Schedule A, Part III, line 17 .....	18	2.16 %

**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 in line 12 on 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
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> 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>		
<b>b</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>		
<b>c</b> 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>		
<b>4a</b> 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>		
<b>b</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>		
<b>c</b> 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>		
<b>5a</b> 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>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> 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>		
<b>9a</b> 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>		
<b>b</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>		
<b>c</b> 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>		
<b>10a</b> 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 10b below.</i>		
<b>b</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>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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>b</b> A family member of a person described in (a) above?		
<b>c</b> 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>		
	<b>11a</b>	
	<b>11b</b>	
	<b>11c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>2</b> 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>		
	<b>1</b>	
	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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>		
	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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>		
<b>3</b> 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>		
	<b>1</b>	
	<b>2</b>	
	<b>3</b>	

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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>b</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>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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>b</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>		
	<b>2a</b>	
	<b>2b</b>	
	<b>3a</b>	
	<b>3b</b>	



**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	<b>Adjusted Net Income</b> (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):		
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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> 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 <b>Total annual distributions.</b> 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 <b>Total</b> 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. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 <b>Excess distributions carryover to 2020.</b> 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			

Schedule A (Form 990 or 990-EZ) 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.)

Lined area for supplemental information.



**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

Employer identification number

CRYSTAL PEAKS YOUTH RANCH, CO.

91-1821187

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**  
Open to Public Inspection

Name of the organization

CRYSTAL PEAKS YOUTH RANCH, CO.

Employer identification number

91-1821187

**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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> 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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 (for example, recreation or education)     Preservation of a historically important land area

Protection of natural habitat     Preservation of a certified historic structure

Preservation of open space

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 Tax 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 FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

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 make 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 program
  - 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:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 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 on 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
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> 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** Term 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:
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> Unrelated organizations   | <b>3a(i)</b>  |    |
| <b>(ii)</b> Related organizations  | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <b>3b</b>     |    |

**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
<b>1a</b> Land		1,426,394.		1,426,394.
<b>b</b> Buildings		3,309,556.	405,863.	2,903,693.
<b>c</b> Leasehold improvements		381,828.	239,755.	142,073.
<b>d</b> Equipment		515,703.	355,740.	159,963.
<b>e</b> Other		174,188.	47,600.	126,588.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,758,711.



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.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely held equity interests, and Other (A-H).

Total. (Col. (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.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows numbered 1 through 9.

Total. (Col. (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.

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 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.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes Federal income taxes, followed by rows 2-9.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

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.

Series of horizontal lines provided for entering supplemental information.





**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		<b>FUNDRAISING EVENTS</b> (event type)	(event type)	<b>NONE</b> (total number)	
Revenue	<b>1</b> Gross receipts .....	36,438.			36,438.
	<b>2</b> Less: Contributions .....	35,179.			35,179.
	<b>3</b> Gross income (line 1 minus line 2) .....	1,259.			1,259.
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....				
	<b>7</b> Food and beverages .....				
	<b>8</b> Entertainment .....				
	<b>9</b> Other direct expenses .....				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				1,259.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue .....				
	<b>2</b> Cash prizes .....				
Direct Expenses	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

**b** If "No," explain: \_\_\_\_\_  
\_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

**b** If "Yes," explain: \_\_\_\_\_  
\_\_\_\_\_

11 Does the organization conduct gaming activities with nonmembers?  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity conducted in:
a The organization's facility 13a %
b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name
Address

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c If "Yes," enter name and address of the third party:
Name
Address

16 Gaming manager information:

Name
Gaming manager compensation \$
Description of services provided
Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.





**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ **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](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization **CRYSTAL PEAKS YOUTH RANCH, CO.** Employer identification number **91-1821187**

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				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	295,758.	HI-LO METHOD
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( GENERAL SUPPL )	X	25	5,044.	FAIR MARKET VALUE
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

	Yes	No
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?		X
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?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

CRYSTAL PEAKS YOUTH RANCH, CO.

Employer identification number

91-1821187

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

690 ONE-ON-ONE SESSIONS WERE COMPLETED WITH A CPYR EQUINE COUNSELOR.

THE RANCH CONTINUED TO PURSUE RELATIONSHIPS WITH THE LOCAL COMMUNITY,  
AND HAD 22 SESSION GROUPS & SMALL GROUPS ATTEND CPYR IN 2019, WHICH WAS  
AN INCREASE OF SIXTEEN GROUPS FROM PREVIOUS YEARS. HOSTING THESE SMALL  
GROUPS ALLOW MORE KIDS AND FAMILIES OUTSIDE OF THE CORE SESSION PROGRAM  
TO BE A PART OF THE RANCH.

THE CPYR STAFF COMPLETED 660 SESSIONS FROM OUR REFERRAL PROGRAMS IN  
2019. THESE SESSIONS ARE FOR CHILDREN IN "AT RISK" SITUATIONS. OUR  
REFERRAL PROGRAM ENCOMPASSED 39% OF OUR SESSIONS IN 2019.

CPYR HOSTED APPROXIMATELY 5,818 VISITORS IN 2019.

IN ADDITION TO OUR STAFF LEADING SESSIONS, WE HOSTED SIX INTERNS FROM  
AROUND THE UNITED STATES TO TRAIN AND EQUIP THEM TO LEAD SESSIONS WITH  
CHILDREN AND FAMILIES. OVER THE COURSE OF THE 2019 SESSION SEASON, THE  
INTERNS LED 466 SESSIONS AND VOLUNTEERED APPROXIMATELY 7,810 HOURS OF  
THEIR TIME TO THE MINISTRIES AT CPYR.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

NEGLECT TO INDIRECT RESCUE FROM SLAUGHTER. TWO OF THEM WERE USED IN  
SESSIONS BY THE END OF THE YEAR.

THE RANCH ADOPTED ONE HORSE SPECIFICALLY FOR THE CHILDREN'S SESSION

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization

CRYSTAL PEAKS YOUTH RANCH, CO.

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PROGRAM.

ONE HORSE WAS RELOCATED INTO A LOVING HOME.

CPYR MAINTAINED EXCELLENT OVER-ALL HERD HEALTH IN THE YEAR 2019 (SOURCE BEND EQUINE VET CLINIC).

ALL HORSES RECEIVED ROUTINE DENTAL CARE, FARRIER WORK, VACCINES, AND DEWORMING MEDICATION.

THE RANCH WAS CHOSEN AS A RECIPIENT FOR FREE VACCINES FROM THE UNWANTED HORSE COALITION VETERINARY RELIEF CAMPAIGN.

ALL EQUINE LIVING SPACES WERE MAINTAINED TO ABOVE STANDARD LEVELS, RESULTING NATURALLY IN A MINIMAL FLY POPULATION AND NO DISEASES SPREAD BY FLIES.

MANURE WAS REGULARLY COMPOSTED AND RECYCLED FOR USE ON OUR PASTURES AND GARDENS.

THE RANCH UTILIZED OUR ADDITIONAL 44 ACRES OF PASTURE TO PRACTICE ROTATIONAL GRAZING WITH OUR HERD. THIS RESULTED IN VIBRANT GASTRO-INTESTINAL AND EXCELLENT HOOF HEALTH FOR THE ENTIRE HERD.

HORSES WITH MINOR INJURIES OR MEDICAL ISSUES WERE SEEN AND CARED FOR PROMPTLY AND PROFESSIONALLY IN COLLABORATION WITH OUR LOCAL VETERINARY OFFICE.

HORSES WITH INDIVIDUAL DIETARY NEEDS WERE FED SEPARATELY YET CONTINUED



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TO BE TURNED OUT WITH THE HERD IN CONSIDERATION OF THEIR NATURAL DESIRE  
FOR HERD COMPANIONSHIP.

ALL SESSION LEADERS AND INTERNS WERE TRAINED IN BASIC HORSE FIRST AID.

KIDS/CLIENTS ATTENDING SESSIONS ASSISTED IN CARE FOR THE VETERAN  
(OLDER) HERD. RANCH VISITORS, WHO SHOWED EQUINE CARE INTEREST,  
ASSISTED WITH RANCH STAFF IN MINOR VETTING PROCEDURES, DENTAL CARE, AND  
FARRIER CARE.

CPYR HOSTED TWO CLINICS FOR OUR SIMILAR MINISTRIES INVOLVING HERD  
MANAGEMENT, HORSE HEALTH, AND HORSE TRAINING CLASSES.

THE RANCH PROVIDED ROUTINE AND WEEKLY HORSE SAFETY CLASSES FOR STAFF,  
VOLUNTEERS, AND INTERNS.

CPYR PARTNERED WITH A LOCAL HORSE TRAINER WHO OFFERED FIVE CLINICS AND  
EQUINE TRAINING DEMONSTRATIONS AS WELL AS FOUR CONTINUING EDUCATION  
CLASSES FOR OUR STAFF, VOLUNTEERS, AND THE LOCAL HORSE COMMUNITY.

OUR HORSES PARTICIPATED IN 690 ONE-ON-ONE SESSIONS WITH CHILDREN.

CPYR SUPPORTED LOCAL "LIFE-SKILL" TYPE SCHOOLS BY WELCOMING SEVEN  
SEPARATE GROUPS IN 2019 TO TEACH STUDENTS HORSE CARE AND RIDING SKILLS.

TWO SIX-WEEK INTENSIVE CLASSES WERE OPENED FOR LOCAL SESSION GIRLS TO  
LEARN HORSE TRAINING TECHNIQUES AND RIDING SKILLS. THESE GIRLS  
ASSISTED WITH THE RANCH'S HORSES-IN-TRAINING TO PREPARE THEM FOR

Name of the organization

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SESSIONS.

IN 2019, 79 PEOPLE/FAMILIES SPONSORED FIFTEEN DIFFERENT RANCH HORSES,  
RAISING \$48,362.

CPYR PERFORMED ROUTINE SAFETY CHECKS AND CLEANING ON ALL SADDLES AND  
BRIDLES USED IN OUR RIDING PROGRAM.

THE RANCH UPDATED AND REPLACED EXPIRED RIDING HELMETS TO MEET CURRENT  
ASTM/SEI-CERTIFICATIONS.

UTILIZING OUR INDOOR ARENA, CPYR HOSTED A "TACK SHARE AND SALE." IN  
THIS EVENT, THE RANCH FREELY GAVE AWAY EXTRA TACK TO THE COMMUNITY AND  
ACCEPTED DONATIONS FROM INDIVIDUALS WHO DESIRED TO GIVE.

CPYR SUPPORTED SEVERAL OTHER SIMILAR ORGANIZATIONS BY SENDING ASSORTED  
EQUINE EQUIPMENT TO EQUINE MINISTRY ORGANIZATIONS LOCATED NATIONWIDE.

TOTAL TACK SALES GENERATED \$6,236 TO ASSIST WITH HORSE CARE AND VETTING  
NEEDS.

CPYR PARTICIPATED IN THE REDMOND 4TH OF JULY PARADE, ENTERING SEVEN  
HORSES AND ONE LARGE FLOAT.

THE RANCH ALSO PARTICIPATED IN THE BEND VETERAN'S DAY PARADE, BRINGING  
FOUR HORSES AND CHILDREN RIDERS.

THE EQUINE MANAGER AND PROGRAM ASSISTANT PARTICIPATED IN EQUINE RESCUE

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TRAINING OFFERED BY THE LOCAL SHERIFF'S DEPARTMENT AND HUMANE SOCIETY.

THIS CLASS WAS FASHIONED FOR FIRST RESPONDERS, LAW ENFORCEMENT, AND FOR EQUINE RESCUE ORGANIZATIONS.

CPYR NETWORKED WITH THE SHERIFF'S DEPARTMENT TO FOSTER RELATIONSHIPS AND SUPPORT FOR LOCAL HORSES IN NEED.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CPYR HOSTED 97 SMALL AND LARGE TOURS IN 2019.

CPYR INVESTED IN MAKING CONNECTIONS WITH LOCAL ORGANIZATIONS, CREATING THE OPPORTUNITY FOR FAMILIES TO PARTICIPATE IN THE PROGRAM THAT WOULD OTHERWISE NOT BE ABLE TO. CPYR PROVIDES PRIORITY SCHEDULING FOR THESE FAMILIES.

CPYR ORGANIZED ANOTHER "HARVEST DAY" IN WHICH FAMILIES WERE INVITED TO COME TO FREE CLASSES TO LEARN SKILLS. SEWING, WOODWORKING, APPLESAUCE MAKING, LEATHERWORKING, AND A KIDS' SENSORY ROOM WERE A FEW OF THE MANY OPPORTUNITIES AFFORDED TO RANCH PARTICIPANTS. IN 2019, THE RANCH PURCHASED NEW FRUIT TREES - PEARS, PLUMS, APPLES, NECTARINES, FIG, AND PEACH AS WELL AS BLUEBERRY PLANTS AND POTATOES FOR OUR UP-AND-COMING ROOT VEGETABLE PATCH. AS WE ARE ABLE TO CONTINUE TO GROW OUR OWN FOOD ON THE PROPERTY, WE ARE HOPEFUL FOR OUR "HARVEST DAY" TO BECOME A LITERAL HARVEST OF OUR OWN ORCHARD THAT TEACHES KIDS AND FAMILIES HOW TO CORRECTLY CAN AND STORE THEIR OWN FOOD.

THE "GIFT ROOM" AT CPYR FUNNELED "ITEM" DONATIONS THROUGH TO FAMILIES IN NEED INCLUDING HANDMADE HATS AND MITTENS FOR COLD-WEATHER

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PROTECTION, CLOTHING, AND A LARGE DONATION OF INDIVIDUALLY PACKED  
SNACKS, LAUNDRY SOAP, VITAMINS, AND DIETARY SUPPLEMENTS WHICH WAS  
GENEROUSLY DONATED BY A NATIONAL DISTRIBUTOR.

IN 2019, THE RANCH HELD TWELVE "REFUGE FELLOWSHIP" GATHERINGS AND THE  
ATTENDANCE TO EACH ONE OF THESE EVENTS FLUCTUATED BETWEEN 175-300  
PEOPLE. WE ESTIMATE THAT 1,910 PEOPLE ATTENDED REFUGE IN 2019.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CPYR HOSTED AND CONDUCTED ITS' 22ND INFORMATION CLINIC WHICH EQUIPS  
INDIVIDUALS INTERESTED IN STARTING A 501(C)(3) MINISTRY LIKE CPYR.  
THERE WERE 88 CLINIC ATTENDEES IN 2019 FROM 28 STATES IN THE U.S. AND  
THREE INTERNATIONAL COUNTRIES INCLUDING CANADA, NEW ZEALAND, AND UNITED  
KINGDOM.

IN 2019, 22 NEW SIMILAR MINISTRIES WERE ESTABLISHED IN U.S.  
COMMUNITIES, NEW ZEALAND, AND CANADA WHERE THESE SERVICES HAD NOT YET  
BEEN AVAILABLE. THESE NOT-FOR-PROFIT CORPORATIONS WERE LAUNCHED BY  
INDIVIDUALS THAT WERE INSPIRED TO SERVE THEIR COMMUNITIES THROUGH  
ATTENDING OUR EMPOWERMENT EVENTS AND ONGOING CONSULTATION FROM CPYR  
STAFF.

AS OF THE END OF 2019, THE RANCH IS AWARE OF 124 ACTIVE SIMILAR  
PROGRAMS IN 36 STATE AND THREE ADDITIONAL COUNTRIES. THESE MINISTRY  
LEADERS HAVE BEEN ASSISTED BY THE CPYR MISSION TO FURTHER THE CPYR  
MINISTRY MODEL WORLDWIDE.

THE FOUNDERS OF CRYSTAL PEAKS YOUTH RANCH VISITED FOUR SIMILAR MINISTRY



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PROGRAMS IN THE U.S. DURING 2019 TO OFFER SUPPORT AND PROFESSIONAL  
CONSULTATION.

OUR SIMILAR MINISTRIES MANAGER ALSO VISITED HOPE RANCH IN HILO, HI TO  
OFFER CONSULT AND EMPOWER THEIR TEAM.

FIVE SIMILAR MINISTRY PROGRAMS HOSTED REGIONAL SUPPORT CLINICS IN 2019  
IN THE EAST COAST, MIDWEST, CENTRAL, MOUNTAIN, AND WEST COAST REGIONS.  
ENCOURAGED BY OUR MINISTRY MODEL, THESE ORGANIZATIONS HAVE CHOSEN TO  
INVEST IN CULTIVATING LEADERSHIP, SUPPORT, AND PROGRAMMING ACROSS THEIR  
REGIONS BY PROVIDING A FORUM FOR CONSULT AND ACCOUNTABILITY.  
EXPENSES \$ 256,091. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2:

LINE 2 EXPLANATION - BOARD MEMBERS KENNETH AND KIMBERLY MEEDER ARE HUSBAND  
AND WIFE

FORM 990, PART VI, SECTION B, LINE 11B:

LINE 11A EXPLANATION - COPIES OF THE FORM 990 ARE GIVEN TO ALL BOARD  
MEMBERS IN A BOARD MEETING PRIOR TO FILING THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C:

SELF-MONITORED AND SELF-ENFORCED BY GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 15B:

1. REVIEW AND APPROVAL. THE COMPENSATION OF THE PERSON IS REVIEWED AND  
APPROVED BY THE BOARD OF DIRECTORS OR COMPENSATION COMMITTEE OF THE  
ORGANIZATION, PROVIDED THAT PERSONS WITH CONFLICTS OF INTEREST TO THE

Name of the organization

CRYSTAL PEAKS YOUTH RANCH, CO.

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COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN THE REVIEW AND APPROVAL.

2. USE OF DATA AS COMPARABLE COMPENSATION. THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS.

3. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING. THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT.

FORM 990, PART VI, SECTION C, LINE 19:

THEY ARE AVAILABLE UPON REQUEST AND ON THE GUIDESTAR WEBSITE.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

ACCRUAL/CASH ADJUSTMENT, NET:

PROGRAM SERVICE EXPENSES	33,669.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	33,669.

EQUINE EXPENSES:

PROGRAM SERVICE EXPENSES	30,004.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	30,004.

PRINTING & REPRODUCTION:

PROGRAM SERVICE EXPENSES	21,526.
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Name of the organization CRYSTAL PEAKS YOUTH RANCH, CO.	Employer identification number 91-1821187
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MANAGEMENT AND GENERAL EXPENSES	2,249.
FUNDRAISING EXPENSES	3,506.
TOTAL EXPENSES	27,281.

**DUES & SUBSCRIPTIONS:**

PROGRAM SERVICE EXPENSES	15,524.
MANAGEMENT AND GENERAL EXPENSES	1,622.
FUNDRAISING EXPENSES	2,528.
TOTAL EXPENSES	19,674.

**EQUIPMENT REPAIR & MAINTENANCE:**

PROGRAM SERVICE EXPENSES	14,321.
MANAGEMENT AND GENERAL EXPENSES	1,496.
FUNDRAISING EXPENSES	2,333.
TOTAL EXPENSES	18,150.

**FACILITIES INSURANCE:**

PROGRAM SERVICE EXPENSES	13,978.
MANAGEMENT AND GENERAL EXPENSES	1,460.
FUNDRAISING EXPENSES	2,277.
TOTAL EXPENSES	17,715.

**TELEPHONE & INTERNET:**

PROGRAM SERVICE EXPENSES	13,166.
MANAGEMENT AND GENERAL EXPENSES	1,375.
FUNDRAISING EXPENSES	2,144.
TOTAL EXPENSES	16,685.

Name of the organization <b>CRYSTAL PEAKS YOUTH RANCH, CO.</b>	Employer identification number <b>91-1821187</b>
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**OTHER EMPLOYMENT EXPENSES:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>12,765.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>1,333.</b>
<b>FUNDRAISING EXPENSES</b>	<b>2,079.</b>
<b>TOTAL EXPENSES</b>	<b>16,177.</b>

**MERCHANT FEES:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>12,685.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>1,325.</b>
<b>FUNDRAISING EXPENSES</b>	<b>2,066.</b>
<b>TOTAL EXPENSES</b>	<b>16,076.</b>

**BENEVOLENCE GIFTS:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>9,318.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>973.</b>
<b>FUNDRAISING EXPENSES</b>	<b>1,518.</b>
<b>TOTAL EXPENSES</b>	<b>11,809.</b>

**GROUNDS & STRUCTURE REPAIR & MAINTENANCE:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>8,384.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>875.</b>
<b>FUNDRAISING EXPENSES</b>	<b>1,365.</b>
<b>TOTAL EXPENSES</b>	<b>10,624.</b>

**WORKERS COMP INSURANCE:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>5,959.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>622.</b>
<b>FUNDRAISING EXPENSES</b>	<b>971.</b>



Name of the organization <b>CRYSTAL PEAKS YOUTH RANCH, CO.</b>	Employer identification number <b>91-1821187</b>
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<b>TOTAL EXPENSES</b>	<b>7,552.</b>
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**MERCHANDISE GIFTS:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>5,039.</b>
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<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>526.</b>
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<b>FUNDRAISING EXPENSES</b>	<b>821.</b>
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<b>TOTAL EXPENSES</b>	<b>6,386.</b>
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**SUPPLIES - OTHER:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>4,889.</b>
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<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>511.</b>
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<b>FUNDRAISING EXPENSES</b>	<b>796.</b>
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<b>TOTAL EXPENSES</b>	<b>6,196.</b>
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**LICENSES, PERMITS, TAXES & FEES:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>4,609.</b>
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<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>481.</b>
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<b>FUNDRAISING EXPENSES</b>	<b>751.</b>
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<b>TOTAL EXPENSES</b>	<b>5,841.</b>
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**MINISTRY SUPPORT:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>5,500.</b>
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<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>0.</b>
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<b>FUNDRAISING EXPENSES</b>	<b>0.</b>
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<b>TOTAL EXPENSES</b>	<b>5,500.</b>
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**STAFF TRAINING & UNIFORMS:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>3,385.</b>
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Name of the organization <b>CRYSTAL PEAKS YOUTH RANCH, CO.</b>	Employer identification number <b>91-1821187</b>
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<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>354.</b>
<b>FUNDRAISING EXPENSES</b>	<b>551.</b>
<b>TOTAL EXPENSES</b>	<b>4,290.</b>

**DIRECTOR INSURANCE:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>0.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>2,289.</b>
<b>FUNDRAISING EXPENSES</b>	<b>0.</b>
<b>TOTAL EXPENSES</b>	<b>2,289.</b>

**FACILITIES LEASE:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>1,622.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>169.</b>
<b>FUNDRAISING EXPENSES</b>	<b>264.</b>
<b>TOTAL EXPENSES</b>	<b>2,055.</b>

**WEBSITE:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>1,050.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>110.</b>
<b>FUNDRAISING EXPENSES</b>	<b>171.</b>
<b>TOTAL EXPENSES</b>	<b>1,331.</b>

**GUEST SPEAKERS:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>1,000.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>0.</b>
<b>FUNDRAISING EXPENSES</b>	<b>0.</b>
<b>TOTAL EXPENSES</b>	<b>1,000.</b>

Name of the organization

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EQUIPMENT RENTAL:

PROGRAM SERVICE EXPENSES	551.
MANAGEMENT AND GENERAL EXPENSES	58.
FUNDRAISING EXPENSES	90.
TOTAL EXPENSES	699.

RENTAL EXPENSES:

PROGRAM SERVICE EXPENSES	320.
MANAGEMENT AND GENERAL EXPENSES	33.
FUNDRAISING EXPENSES	52.
TOTAL EXPENSES	405.

GENERAL BUSINESS EXPENSES:

PROGRAM SERVICE EXPENSES	88.
MANAGEMENT AND GENERAL EXPENSES	9.
FUNDRAISING EXPENSES	14.
TOTAL EXPENSES	111.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	261,519.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ACCRUAL/CASH ADJUSTMENT, NET	33,669.
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2019 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Co. No.	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
4	LEASEHOLD IMPROVEMENTS	07/22/99	150DE	15.00	MC	17	688.				688.	688.	0.	0.	688.
6	POND IMPROVEMENT	07/01/00	200DE	10.00	HM	17	3,251.				3,251.	3,251.	0.	0.	3,251.
8	FACILITY IMPROVEMENTS	07/01/01	SL	39.00	MM	17	7,775.				7,775.	3,475.	199.	199.	3,674.
9	OUT BUILDINGS	VARIOUS	SL	25.00		16	4,500.				4,500.	2,700.	180.	180.	2,880.
12	BARN & CORRALS	04/01/05	SL	25.00		16	15,760.				15,760.	8,663.	630.	630.	9,293.
14	IMPROVEMENTS	06/01/05	SL	10.00		16	6,709.				6,709.	6,709.	0.	0.	6,709.
125	UPPER OFFICE IMPROVEMENT	05/15/05	SL	10.00		16	700.				700.	653.	0.	0.	653.
126	FACILITY IMPROVEMENT	05/15/06	SL	10.00		16	16,039.				16,039.	16,039.	0.	0.	16,039.
127	VARIOUS IMPROVEMENTS	05/15/06	SL	10.00		16	8,921.				8,921.	8,921.	0.	0.	8,921.
130	WOODSTOVE IMPROVEMENT	05/11/06	SL	10.00		16	539.				539.	539.	0.	0.	539.
132	BARN	05/01/07	SL	30.00		16	4,577.				4,577.	1,785.	153.	153.	1,938.
134	IMPROVEMENTS	VARIOUS	SL	30.00		16	14,120.				14,120.	5,652.	471.	471.	6,123.
137	IMPROVEMENTS	07/01/08	SL	10.00		16	52,989.				52,989.	52,989.	0.	0.	52,989.
144	BUILDING	05/23/09	SL	15.00		16	23,094.				23,094.	14,758.	1,540.	1,540.	16,298.
148	OFFICE BUILDING	12/04/09	SL	27.00		16	76,349.				76,349.	25,688.	2,828.	2,828.	28,516.
175	IMPROVEMENTS	VARIOUS	SL	15.00		16	11,391.				11,391.	6,831.	759.	759.	7,590.
197	WEST RANCH STRUCTURES	08/06/13	SL	40.00		16	329,096.				329,096.	44,564.	8,227.	8,227.	52,791.

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199	GREENHOUSE	05/01/13	SL	15.00		16	68,444.				68,444.	25,857.		4,563.	30,420.
200	UPPER BARN IMPROVEMENT	01/01/13	SL	15.00		16	28,027.				28,027.	11,208.		1,868.	13,076.
201	2012 IMPROVEMENTS BARN SOUND SYSTEM	05/01/13	SL	15.00		16	134,269.				134,269.	50,723.		8,951.	59,674.
203	IMPROVEMENT	12/30/14	SL	5.00		16	13,000.				13,000.	10,400.		2,600.	13,000.
209	TRADING POST IMPROVEMENT	01/01/14	SL	10.00		16	4,250.				4,250.	2,125.		425.	2,550.
210	BARN IMPROVEMENT	01/01/14	SL	10.00		16	5,807.				5,807.	2,905.		581.	3,486.
211	STUDIO ROOM IMPROVEMENT	09/01/14	SL	10.00		16	22,541.				22,541.	9,767.		2,254.	12,021.
212	NEW WELL IMPROVEMENT	04/25/14	SL	10.00		16	49,572.				49,572.	23,133.		4,957.	28,090.
214	FENCING IMPROVEMENT	07/03/14	SL	10.00		16	1,240.				1,240.	558.		124.	682.
229	IRRIGATION IMPORVEMENT	05/05/14	SL	10.00		16	8,800.				8,800.	4,107.		880.	4,987.
230	HOUSE IMPROVEMENTS	05/28/14	SL	30.00		16	1,266.				1,266.	193.		42.	235.
231	LANDSCAPING (SOD) IMPROVEMENT	05/29/14	SL	10.00		16	3,348.				3,348.	1,535.		335.	1,870.
232	NORTH RANCH STRUCTURES	05/31/15	SL	30.00		16	901,319.				901,319.	107,658.		30,044.	137,702.
241	EAST RANCH RESIDENCE GREENHOUSE	04/29/16	SL	40.00		16	158,320.				158,320.	10,555.		3,958.	14,513.
242	EAST RANCH GARAGE & CARPORT	04/29/16	SL	40.00		16	18,745.				18,745.	1,250.		469.	1,719.
243	EAST RANCH 2 STORY ADMIN OFFICE (1/2)	04/29/16	SL	40.00		16	64,846.				64,846.	4,323.		1,621.	5,944.
244	EAST RANCH WOOD SHOP	04/29/16	SL	25.00		16	19,331.				19,331.	2,061.		773.	2,834.
251	EAST RANCH LOWER RV SHOP/GARAGE	04/29/16	SL	25.00		16	70,294.				70,294.	7,499.		2,812.	10,311.

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252	EAST RANCH (3) ANIMAL SHELTERS	04/29/16	SL	15.00		16	6,590.				6,590.	1,171.		439.	1,610.
253	EAST RANCH UPPER TACK ROOM	04/29/16	SL	25.00		16	6,590.				6,590.	704.		264.	968.
254	EAST RANCH STUDIO/PRAYER ROOM	04/29/16	SL	40.00		16	3,661.				3,661.	245.		92.	337.
255	EAST RANCH WELL HOUSE	04/29/16	SL	15.00		16	3,661.				3,661.	651.		244.	895.
256	EAST RANCH CHICKEN HOUSE	04/29/16	SL	15.00		16	2,197.				2,197.	390.		146.	536.
257	EAST RANCH RESIDENCE GREENHOUSE	04/29/16	SL	15.00		16	2,929.				2,929.	520.		195.	715.
258	EAST RANCH LOWER SHOP	04/29/16	SL	25.00		16	27,836.				27,836.	2,968.		1,113.	4,081.
259	WEST RANCH POND IMPROVEMENT	12/31/16	SL	20.00		16	47,581.				47,581.	4,758.		2,379.	7,137.
260	NORTH RANCH STORAGE UNITS	12/31/16	SL	25.00		16	11,757.				11,757.	940.		470.	1,410.
261	WEST RANCH SHOP	12/31/16	SL	25.00		16	24,827.				24,827.	1,986.		993.	2,979.
262	WEST RANCH OUT-BUILDING-SHELTER	12/31/16	SL	15.00		16	4,746.				4,746.	632.		316.	948.
263	WEST RANCH CABIN 1	12/31/16	SL	40.00		16	64,146.				64,146.	3,208.		1,604.	4,812.
264	2013 WELL	12/31/16	SL	20.00		16	7,577.				7,577.	758.		379.	1,137.
265	ROOT CELLAR	12/31/16	SL	15.00		16	2,508.				2,508.	334.		167.	501.
266	GAZEBO	12/31/16	SL	25.00		16	5,102.				5,102.	408.		204.	612.
275	WEST RANCH AMPITHEATER	01/01/17	SL	25.00		16	48,658.				48,658.	3,892.		1,946.	5,838.
276	WEST RANCH FENCE	01/01/17	SL	10.00		16	13,417.				13,417.	2,684.		1,342.	4,026.
277	WEST RANCH OUT BUILDING/SHELTER	01/01/17	SL	25.00		16	2,000.				2,000.	160.		80.	240.

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278	EAST RANCH WELL IMPROVEMENT	01/01/17	SL	20.00		16	9,117.				9,117.	912.		456.	1,368.
279	NORTH RANCH MECHANIC SHOP	05/18/17	SL	25.00		16	15,884.				15,884.	1,006.		635.	1,641.
280	NORTH RANCH FENCE	11/09/17	SL	10.00		16	18,229.				18,229.	2,127.		1,823.	3,950.
281	NORTH RANCH DRIVEWAY IMPORVEMENT	08/03/17	SL	20.00		16	2,957.				2,957.	210.		148.	358.
282	WEST RANCH GARDEN SHED	01/01/17	SL	25.00		16	6,746.				6,746.	540.		270.	810.
283	WEST RANCH SHELTER	10/23/17	SL	25.00		16	1,628.				1,628.	76.		65.	141.
284	EAST RANCH HOUSE NEW DECK	11/27/17	SL	25.00		16	11,879.				11,879.	515.		475.	990.
285	EAST RANCH IMPROVEMENT	01/01/17	SL	25.00		16	23,327.				23,327.	1,866.		933.	2,799.
293	NORTH RANCH STRUCTURES	07/01/18	SL	25.00		16	35,248.				35,248.	705.		1,410.	2,115.
294	NORTH RANCH IMPROVEMENTS	07/01/18	SL	25.00		16	3,929.				3,929.	79.		157.	236.
302	ROAD CROSSING	05/31/19	SL	20.00		16	70,563.				70,563.			2,058.	2,058.
303	WEST RANCH PARK	01/01/19	SL	20.00		16	703.				703.			35.	35.
304	NORTH RANCH EQUIPMENT SHED	01/01/19	SL	25.00		16	1,618.				1,618.			65.	65.
305	WEST RANCH BARN REMODEL	05/01/19	SL	25.00		16	1,010,038.				1,010,038.			26,934.	26,934.
307	NORTH RANCH LOAFING SHED	10/11/19	SL	25.00		16	10,445.				10,445.			104.	104.
308	WEST RANCH ROAD IMPROVEMENT	03/06/19	SL	20.00		16	5,180.				5,180.			216.	216.
309	NORTH RANCH ROAD IMPROVEMENT	05/13/19	SL	20.00		16	11,785.				11,785.			393.	393.
310	EAST RANCH ROAD IMPROVEMENT	05/13/19	SL	20.00		16	4,750.				4,750.			158.	158.

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311	WEST RANCH PRIVACY FENCE	04/17/19	SL	10.00	16	2,125.				2,125.			142.	142.
312	WEST RANCH PRIVACY FENCE	09/04/19	SL	10.00	16	1,662.				1,662.			55.	55.
313	NEW RANCH HOME CISTERN SYSTEM	05/13/19	SL	20.00	16	7,871.				7,871.			262.	262.
	* 990 PAGE 10 TOTAL BUILDINGS					3,691,384.				3,691,384.	514,207.		131,411.	645,618.
	FURNITURE & FIXTURES													
140	DEJA VU INTERIORS	02/06/08	SL	5.00	16	451.				451.	451.		0.	451.
141	PICTURES	03/08/08	SL	10.00	16	1,489.				1,489.	1,489.		0.	1,489.
155	MERCHANTILE	03/02/10	SL	7.00	16	200.				200.	200.		0.	200.
160	TRADING POST	03/24/10	SL	5.00	16	429.				429.	429.		0.	429.
168	STORE	07/10/10	SL	5.00	16	175.				175.	175.		0.	175.
174	OFFICE CHAIRS	10/15/10	SL	7.00	16	212.				212.	212.		0.	212.
306	WEST RANCH FURNITURE & FIXTURES	05/01/19	SL	10.00	16	132,564.				132,564.			8,838.	8,838.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES					135,520.				135,520.	2,956.		8,838.	11,794.
	MACHINERY & EQUIPMENT													
2	RANCH IMPLEMENTS	08/01/98	150DB	15.00	HW17	14,529.				14,529.	14,529.		0.	14,529.
3	EQUIPMENT	04/01/98	200DB	5.00	HW17	758.				758.	758.		0.	758.
5	RANCH PORTIO	12/12/99	200DB	7.00	MD17	2,000.				2,000.	2,000.		0.	2,000.
11	EQUIPMENT	05/01/05	SL	7.00	16	14,102.				14,102.	14,102.		0.	14,102.

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13	TRAILERS	02/01/05	SL	7.00		16	15,196.				15,196.	15,196.		0.	15,196.
124	VARIOUS EQUIPMENT	06/01/06	SL	5.00		16	6,995.				6,995.	6,995.		0.	6,995.
133	EQUIPMENT	VARIOUS	SL	7.00		16	11,181.				11,181.	11,181.		0.	11,181.
138	BARN SOUND SYSTEM	01/16/08	SL	5.00		16	4,499.				4,499.	4,499.		0.	4,499.
139	SECURITY SYSTEM OFFICE	01/28/08	SL	6.00		16	699.				699.	699.		0.	699.
142	PAINT SPRAYER	11/12/08	SL	7.00		16	1,388.				1,388.	1,388.		0.	1,388.
143	CHAIN SAW	11/12/08	SL	7.00		16	400.				400.	400.		0.	400.
145	EQUIPMENT	09/12/09	SL	5.00		16	1,033.				1,033.	1,033.		0.	1,033.
146	AM EX EQUIPMENT	12/07/09	SL	5.00		16	1,725.				1,725.	1,725.		0.	1,725.
152	SNAPPY POPCORN	01/19/10	SL	5.00		16	669.				669.	669.		0.	669.
153	FORKS/TRACTOR	02/19/10	SL	5.00		16	1,078.				1,078.	1,078.		0.	1,078.
156	DMI DELL	03/10/10	SL	7.00		16	599.				599.	599.		0.	599.
157	WESTERN TOOL	03/10/10	SL	5.00		16	310.				310.	310.		0.	310.
158	2009 LOAD TRAIL DT	03/17/10	SL	7.00		16	6,701.				6,701.	6,701.		0.	6,701.
159	GANEX PAID	03/24/10	SL	5.00		16	2,043.				2,043.	2,043.		0.	2,043.
162	EQUIPMENT REFRESH	04/07/10	SL	7.00		16	5,711.				5,711.	5,711.		0.	5,711.
164	COMPUTER (KIM)	04/26/10	SL	5.00		16	1,550.				1,550.	1,550.		0.	1,550.
165	WEED WACKER	05/17/10	SL	5.00		16	310.				310.	310.		0.	310.

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166	LAPTOP	05/17/10	SL	5.00		16	2,430.				2,430.	2,430.		0.	2,430.
167	SOUND EQUIPMENT	05/26/10	SL	7.00		16	599.				599.	599.		0.	599.
169	VARIOUS	07/21/10	SL	5.00		16	615.				615.	615.		0.	615.
170	AMPLIFIER	08/17/10	SL	5.00		16	475.				475.	475.		0.	475.
171	SOUND EQUIPMENT NET	09/02/10	SL	7.00		16	780.				780.	777.		0.	777.
172	EQUINE EQUIPMENT	09/04/10	SL	5.00		16	280.				280.	280.		0.	280.
173	SECOND PACK TRIP	09/07/10	SL	5.00		16	203.				203.	203.		0.	203.
177	FUEL TANK	04/15/11	SL	5.00		16	1,687.				1,687.	1,687.		0.	1,687.
179	VARIOUS EQUIPMENT	09/30/11	SL	7.00		16	9,975.				9,975.	9,975.		0.	9,975.
180	PHONE UPGRADES	10/25/11	SL	10.00		16	3,049.				3,049.	2,186.	305.	0.	2,491.
182	VARIOUS EQUIPMENT	05/01/11	SL	5.00		16	444.				444.	444.		0.	444.
183	PUSH MOWER	05/18/13	SL	5.00		16	685.				685.	685.		0.	685.
185	BILL JACKSON-MULTIPLE HAY EQUIPMENT	08/05/13	SL	5.00		16	84,100.				84,100.	84,100.		0.	84,100.
187	BILL JACKSON	09/06/13	SL	5.00		16	1,000.				1,000.	1,000.		0.	1,000.
188	LOG SPLITTER	12/01/13	SL	5.00		16	1,329.				1,329.	1,329.		0.	1,329.
189	APPLE COMPUTER (KAVIE)	12/17/13	SL	5.00		16	2,068.				2,068.	2,068.		0.	2,068.
191	COMPUTER-TROY	03/27/12	SL	5.00		16	3,186.				3,186.	3,186.		0.	3,186.
192	BARN SPEAKERS	04/05/12	SL	10.00		16	3,910.				3,910.	2,568.	391.	0.	2,959.

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193	SEWING MACHINES	07/31/12	SL	5.00		16	190.				190.	190.		0.	190.
194	WOOD SHOP TOOLS	11/30/12	SL	7.00		16	1,250.				1,250.	1,089.		161.	1,250.
195	VARIOUS EQUIPMENT	05/01/12	SL	5.00		16	276.				276.	276.		0.	276.
204	NEW SERVER	07/21/14	SL	5.00		16	9,849.				9,849.	8,701.		1,148.	9,849.
205	(2) NEW COMPUTERS	08/12/14	SL	5.00		16	1,798.				1,798.	1,590.		208.	1,798.
206	WALK IN COOLER	12/04/14	SL	5.00		16	4,000.				4,000.	3,267.		733.	4,000.
208	(3) HORSE TRAILERS	10/17/14	SL	5.00		16	2,500.				2,500.	2,083.		417.	2,500.
213	GOOSENECK FLATBED TRAILER	10/21/14	SL	5.00		16	9,000.				9,000.	7,500.		1,500.	9,000.
219	(D)SOUND EQUIPMENT	01/22/15	SL	5.00		16	1,783.				1,783.	1,398.		208.	1,606.
221	SAFE	04/14/15	SL	10.00		16	1,750.				1,750.	656.		175.	831.
223	SHOP EQUIPMENT	09/30/15	SL	7.00		16	2,985.				2,985.	1,385.		426.	1,811.
225	ELIMINATOR SHOP	11/05/15	SL	7.00		16	2,622.				2,622.	1,187.		375.	1,562.
226	APPLE COMPUTER	12/31/15	SL	5.00		16	1,733.				1,733.	1,041.		347.	1,388.
247	TROY'S NEW LAPTOP	01/07/16	SL	5.00		16	2,915.				2,915.	1,749.		583.	2,332.
248	FARM DISK	02/04/16	SL	10.00		16	1,950.				1,950.	569.		195.	764.
249	ASUS COMPUTER (ELLEN)	02/05/16	SL	5.00		16	1,400.				1,400.	817.		280.	1,097.
267	EAST RANCH CLOSED CIRCUIT CAMERA SYSTEM	12/31/16	SL	5.00		16	1,099.				1,099.	440.		220.	660.
268	KONICA BIZHUB C58 COPIER	07/05/17	SL	6.00		16	5,984.				5,984.	1,496.		997.	2,493.

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\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
269	MANURE SPREADER	07/25/17	SL	10.00		16	17,800.				17,800.	2,522.		1,780.	4,302.
270	FLOW FOR KUBOTA	01/17/17	SL	10.00		16	2,774.				2,774.	531.		277.	808.
271	APPLE CPU (KIM)	02/02/17	SL	5.00		16	3,199.				3,199.	1,226.		640.	1,866.
286	(D)MF-135 TRACTOR	12/10/18	SL	5.00		16	1,000.				1,000.	17.		100.	117.
287	(D)MF-431 TRACTOR	12/10/18	SL	5.00		16	4,000.				4,000.	67.		333.	400.
288	JOHN DEERE TRACTOR (GREEN)	08/20/18	SL	10.00		16	47,265.				47,265.	3,151.		4,727.	7,878.
289	VIDEO CAMERA JVC	03/23/18	SL	5.00		16	2,925.				2,925.	439.		585.	1,024.
291	KUBOTA	02/06/18	SL	10.00		16	14,830.				14,830.	1,942.		1,483.	3,425.
292	KUBOTA	08/22/18	SL	10.00		16	15,284.				15,284.	728.		1,528.	2,256.
296	KEYBOARD FOR REFUGE	11/20/18	SL	10.00		16	2,500.				2,500.	30.		250.	280.
299	KUBOTA MOWER Z421KW-54	06/07/19	SL	10.00		16	7,091.				7,091.			414.	414.
300	GUITAR - MARTIN DSS-17, BLACK SMOKE	09/30/19	SL	10.00		16	1,559.				1,559.			39.	39.
301	VIDEO EQUIPMENT	06/01/19	SL	5.00		16	13,254.				13,254.			1,546.	1,546.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						396,856.				396,856.	254,170.		22,371.	276,541.
	TRANSPORTATION EQUIPMENT														
178	TRACTOR	05/28/11	SL	7.00		16	24,485.				24,485.	24,186.		0.	24,186.
184	2013 GREEN RANGER	07/30/13	SL	5.00		16	8,895.				8,895.	8,895.		0.	8,895.
186	1998 GMC WHITE PU	08/12/13	SL	5.00		16	4,130.				4,130.	4,130.		0.	4,130.

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190	BRAD CARRELL (BOXCARS)	10/21/13	SL	5.00		16	2,495.				2,495.	2,495.		0.	2,495.
245	2016 DODGE RAM 1500	05/02/16	SL	5.00		16	47,125.				47,125.	25,133.		9,425.	34,558.
298	2013 F-250 SILVER	02/06/19	SL	5.00		16	38,500.				38,500.			7,058.	7,058.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT						125,630.				125,630.	64,839.		16,483.	81,322.
	LAND														
196	WEST RANCH LAND	08/06/13	L				470,807.				470,807.			0.	
227	NORTH RANCH LAND	05/31/15	L				463,602.				463,602.			0.	
246	EAST RANCH LAND	04/29/16	L				491,985.				491,985.			0.	
	* 990 PAGE 10 TOTAL LAND						1,426,394.				1,426,394.	0.		0.	0.
	PROGRAM SERVICES														
1	(6) HORSES	06/01/98	200DH	5.00		HM17	8,800.				8,800.	8,800.		0.	8,800.
7	HORSE (HALO)	08/01/01	200DH	5.00		HM17	800.				800.	800.		0.	800.
10	HORSES	08/16/05	SL	7.00		16	2,750.				2,750.	2,750.		0.	2,750.
129	HORSE	01/19/06	SL	7.00		16	700.				700.	700.		0.	700.
136	(12) HORSES	VARIOUS	SL	7.00		16	18,000.				18,000.	18,000.		0.	18,000.
149	ICELANDIC PONY	09/16/10	SL	7.00		16	1,200.				1,200.	1,200.		0.	1,200.
198	WEST RANCH CLOSING COSTS	08/06/13	SL	5.00		16	1,418.				1,418.	1,418.		0.	1,418.
228	HORSES	04/01/15	SL	7.00		16	2,500.				2,500.	1,339.		357.	1,696.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
272	HORSES OAKLEY & OSH	08/03/17	SL	10.00		16	1,000.				1,000.	142.		100.	242.
273	HORSE RESCUE (JEFF W)	11/28/17	SL	10.00		16	750.				750.	81.		75.	156.
297	HORSE - BETHLEHEM'S DAUGHTER	06/07/19	SL	10.00		16	750.				750.			44.	44.
	* 990 PAGE 10 TOTAL PROGRAM SERVICES						38,668.				38,668.	35,230.		576.	35,806.
	* GRAND TOTAL 990 PAGE 10 DEPR						5,814,452.				5,814,452.	871,402.		179,679.	1,051,081.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						4,493,994.			0.	4,493,994.	871,402.			1,002,720.
	ACQUISITIONS						1,320,458.			0.	1,320,458.	0.			48,361.
	DISPOSITIONS/RETIRED						6,783.			0.	6,783.	1,482.			2,123.
	ENDING BALANCE						5,807,669.			0.	5,807,669.	869,920.			1,048,958.
	ENDING ACCUM DEPR LESS DISPOSITIONS											1,048,958.			1,048,958.
	ENDING BOOK VALUE											4,758,711.			

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