

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2007 calendar year, or tax year beginning _____, and ending _____

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Termination
 - Amended return
 - Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Colorado Youth Corps Association

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
225 East 16th Avenue 475

City or town State or country ZIP + 4
Denver CO 80203

D Employer identification number
84-1532028

E Telephone number
(303) 863-0600

F Accounting method: Cash Accrual
 Other (specify) ▶

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H and I are not applicable to section 527 organizations.
- H(a)** Is this a group return for affiliates? Yes No
- H(b)** If "Yes," enter number of affiliates ▶ _____
- H(c)** Are all affiliates included? Yes No
(If "No," attach a list. See instructions.)
- H(d)** Is this a separate return filed by an organization covered by a group ruling? Yes No
- I** Group Exemption Number ▶ **N/A**

G Website: ▶ **www.cyca.org**

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **850,864**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a		0	
	b Direct public support (not included on line 1a)	1b		79,974	
	c Indirect public support (not included on line 1a)	1c		0	
	d Government contributions (grants) (not included on line 1a)	1d		743,673	
	e Total (add lines 1a through 1d) (cash \$ 823,647 noncash \$ 0)	1e			823,647
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			23,462
	3 Membership dues and assessments	3			0
	4 Interest on savings and temporary cash investments	4			3,755
	5 Dividends and interest from securities	5			0
	6 a Gross rents	6a			
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c			0	
7 Other investment income (describe ▶ _____)	7			0	
Revenue	8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
		0 8a		0	
		0 8b		0	
		0 8c		0	
	d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			0
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ 0 of contributions reported on line 1b)	9a		0	
	b Less: direct expenses other than fundraising expenses	9b		0	
	c Net income or (loss) from special events. Subtract line 9b from line 9a	9c			0
	10 a Gross sales of inventory, less returns and allowances	10a		0	
b Less: cost of goods sold		10b		0	
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a		10c			0
11 Other revenue (from Part VII, line 103)	11			0	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			850,864	
Expenses	13 Program services (from line 44, column (B))	13		799,915	
	14 Management and general (from line 44, column (C))	14		37,846	
	15 Fundraising (from line 44, column (D))	15		25,414	
	16 Payments to affiliates (attach schedule)	16		0	
	17 Total expenses. Add lines 16 and 44, column (A)	17			863,175
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		-12,311	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		165,697	
	20 Other changes in net assets or fund balances (attach explanation)	20		0	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			153,386

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a	Grants paid from donor advised funds (attach schedule) (cash \$ 0 noncash \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
22 b	Other grants and allocations (attach schedule) (cash \$ 638,119 noncash \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	638,119	638,119		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25 a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	71,424	55,900	5,175	10,349
25 b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	0	0	0	0
25 c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	43,254	32,174	8,488	2,592
27	Pension plan contributions not included on lines 25a, b, and c	2,387	1,738	325	324
28	Employee benefits not included on lines 25a - 27	7,090	4,573	1,154	1,363
29	Payroll taxes	9,242	6,786	1,471	985
30	Professional fundraising fees	0			
31	Accounting fees	8,032		8,032	
32	Legal fees	0			
33	Supplies	4,362	4,048	263	51
34	Telephone	6,621	4,857	1,212	552
35	Postage and shipping	1,480	1,201	183	96
36	Occupancy	10,398	7,839	1,560	999
37	Equipment rental and maintenance	4,292	2,793	829	670
38	Printing and publications	2,210	2,179	31	0
39	Travel	0			
40	Conferences, conventions, and meetings	13,642	12,553	1,048	41
41	Interest	1,368	1,368		
42	Depreciation, depletion, etc. (attach schedule)	3,354	2,098	756	500
43	Other expenses not covered above (itemize):				
43 a	Contracted services	21,524	12,858	2,444	6,222
43 b	Dues and subscriptions	1,105	777	213	115
43 c	Insurance	5,875	2,905	2,625	345
43 d	Other expenses	7,396	5,149	2,037	210
43 e		0	0	0	0
43 f		0	0	0	0
43 g		0	0	0	0
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	863,175	799,915	37,846	25,414

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 0; (ii) the amount allocated to Program services \$;
 (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

<p>What is the organization's primary exempt purpose? ▶ See STMT 1 for description</p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p>	<p>Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)</p>
<p>a See STMT 1</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ 638,119) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	<p>697,485</p>
<p>b See STMT 1</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	<p>102,430</p>
<p>c</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	<p>0</p>
<p>d</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	<p>0</p>
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$ 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	<p>0</p>
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶</p>	<p>799,915</p>

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing			45		
	46 Savings and temporary cash investments		164,025	46	115,761	
	47 a Accounts receivable	47a	66,535			
	b Less: allowance for doubtful accounts	47b	0	43,185	47c	66,535
	48 a Pledges receivable	48a	0			
	b Less: allowance for doubtful accounts	48b	0	0	48c	0
	49 Grants receivable				49	25,000
	50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			0	50a	0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				50b	
	51 a Other notes and loans receivable (attach schedule)	51a	0			
	b Less: allowance for doubtful accounts	51b	0	0	51c	0
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			5,662	53	3,980
	54 a Investments—publicly-traded securities.	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		0	54a	0
	b Investments—other securities (attach schedule).	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		0	54b	0
	55 a Investments—land, buildings, and equipment: basis	55a	0			
	b Less: accumulated depreciation (attach schedule)	55b	0	0	55c	0
	56 Investments—other (attach schedule)			0	56	0
	57 a Land, buildings, and equipment: basis	57a	34,775			
b Less: accumulated depreciation (attach schedule)	57b	33,483	4,645	57c	1,292	
58 Other assets, including program-related investments (describe _____)			0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58			217,517	59	212,568	
Liabilities	60 Accounts payable and accrued expenses		47,320	60	54,432	
	61 Grants payable			61		
	62 Deferred revenue		4,500	62	4,750	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		0	63	0	
	64 a Tax-exempt bond liabilities (attach schedule)		0	64a	0	
	b Mortgages and other notes payable (attach schedule)		0	64b	0	
	65 Other liabilities (describe _____)		0	65	0	
66 Total liabilities. Add lines 60 through 65			51,820	66	59,182	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> X and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted		119,027	67	54,354	
	68 Temporarily restricted		46,670	68	99,032	
	69 Permanently restricted			69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds			70		
	71 Paid-in or capital surplus, or land, building, and equipment fund			71		
	72 Retained earnings, endowment, accumulated income, or other funds			72		
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21).			165,697	73	153,386	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73.			217,517	74	212,568	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	850,864
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4	0	
	Add lines b1 through b4		b	0
c	Subtract line b from line a		c	850,864
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2	0	
	Add lines d1 and d2		d	0
e	Total revenue (Part I, line 12). Add lines c and d		e	850,864

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	863,175
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify):	b4	0	
	Add lines b1 through b4		b	0
c	Subtract line b from line a		c	863,175
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2	0	
	Add lines d1 and d2		d	0
e	Total expenses (Part I, line 17). Add lines c and d		e	863,175

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee-benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name Ann Baker Easley Str 225 E. 16th Ave. Ste City Denver ST CO ZIP 80220	Title Exec Director Hr/WK 40	25,561	2,501	0
Name Jennifer Freeman Str 225 E. 16th Ave. Ste City Denver ST CO ZIP 80220	Title Exec Director Hr/WK 40	45,863	8,635	0
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			
Name N/A Str City ST ZIP	Title Hr/WK			

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

- 75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 16
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."
d Does the organization have a written conflict of interest policy?

Table with 3 columns: Question, Yes, No. Rows 75b, 75c, 75d with 'X' marks in Yes/No columns.

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation (if not paid, enter -0-), (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Multiple rows with 'N/A' entries.

Part VI Other Information (See the instructions.)

- 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt
81 a Enter direct and indirect political expenditures. (See line 81 instructions.)
b Did the organization file Form 1120-POL for this year?

Table with 3 columns: Question, Yes, No. Rows 76, 77, 78a, 78b, 79, 80a, 81a, 81b with 'X' marks in Yes/No columns.

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	N/A	
c	Dues, assessments, and similar amounts from members	85c N/A	
d	Section 162(e) lobbying and political expenditures	85d N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b N/A	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A	
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0</u> ; section 4912 <u>0</u> ; section 4955 <u>0</u>		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		N/A
90 a	List the states with which a copy of this return is filed		None
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	3
91 a	The books are in care of Name Jennifer Freeman Telephone no. (303) 825-6246 Located at 225 E. 16th Ave. #475 City Denver ST CO ZIP + 4 80203		
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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Training fees and services					23,462
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	3,755	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		3,755	23,462
105 Total (add line 104, columns (B), (D), and (E))					27,217

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	Training fees for youth corps directors and participating youth.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%		0	0
	%		0	0
	%		0	0
	%		0	0

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106	Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				0

107	Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

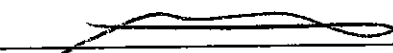
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				0

108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	Yes	No
			N/A

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.


Please Sign Here

Date 5/2/08

Signature of officer 

Type or print name and title Gerhard Holtzendorf, Secretary/Treasurer

Paid Preparer's Use Only

Preparer's signature  Date 4/24/2008 Check if self-employed

Firm's name (or yours if self-employed), address, and ZIP + 4 Cottrell & Associates, PC EIN 84-1328258

7775 Glen Ridge Dr., Castle Rock, CO 80108 Phone no. (303) 814-8546

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization

Employer identification number

Colorado Youth Corps Association

84-1532028

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000				0

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services		0

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services		0

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

Schedule A (Form 990 or 990-EZ) 2007

(HTA)

Part III Statements About Activities (See page 2 of the instructions.)

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ 6,000 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

	Yes	No
1	X	

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

--	--	--

a Sale, exchange, or leasing of property?

2a		X
----	--	---

b Lending of money or other extension of credit?

2b		X
----	--	---

c Furnishing of goods, services, or facilities?

2c		X
----	--	---

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990

2d	X	
----	---	--

e Transfer of any part of its income or assets?

2e		X
----	--	---

3 a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a		X
----	--	---

b Did the organization have a section 403(b) annuity plan for its employees?

3b	X	
----	---	--

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c		X
----	--	---

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d		X
----	--	---

4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a		X
----	--	---

b Did the organization make any taxable distributions under section 4966?

4b		X
----	--	---

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c		X
----	--	---

d Enter the total number of donor advised funds owned at the end of the tax year ▶ NA

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ NA

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ 0

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ 0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____ City _____ ST _____ Country _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
					0
					0
					0
					0
					0
					0
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	893,181	1,101,328	1,201,013	1,164,109	4,359,631
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	7,009	8,261	5,210	5,812	26,292
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	4,326	2,493	821	1,545	9,185
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	904,516	1,112,082	1,207,044	1,171,466	4,395,108
24 Line 23 minus line 17	897,507	1,103,821	1,201,834	1,165,654	4,368,816
25 Enter 1% of line 23	9,045	11,121	12,070	11,715	
26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24				26a 87,376
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 92,624
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 4,368,816
d Add: Amounts from column (e) for lines:	18 9,185	19	26b 92,624		26d 101,809
e Public support (line 26c minus line 26d total)					26e 4,267,007
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 97.67%
27 Organizations described on line 12:	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:				NA
	(2006)	(2005)	(2004)	(2003)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2006)	(2005)	(2004)	(2003)	
c Add: Amounts from column (e) for lines:	15	16			27c 0
	17	20	21		27d 0
d Add: Line 27a total and line 27b total					27e 0
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 0.00%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0.00%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
34 a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A

Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)		6,000
38 Total lobbying expenditures (add lines 36 and 37)	0	6,000
39 Other exempt purpose expenditures		857,175
40 Total exempt purpose expenditures (add lines 38 and 39)	0	863,175
41 Lobbying nontaxable amount. Enter the amount from the following table—		
If the amount on line 40 is—		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is—		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	0	38,619
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	0	0
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	0	0

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount	54,476	174,854	199,583	177,423	606,336
46 Lobbying ceiling amount (150% of line 45(e))					909,504
47 Total lobbying expenditures	6,000	1,620	4,923	985	13,528
48 Grassroots nontaxable amount	38,619	43,714	49,896	44,356	176,585
49 Grassroots ceiling amount (150% of line 48(e))					264,878
50 Grassroots lobbying expenditures	0	326	523	431	1,280

Part VI-B

Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization

Employer identification number

Colorado Youth Corps Association

84-1532028

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 foundation

Check 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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules—

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Colorado Youth Corps Association

Employer identification number

84-1532028

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Daniels Fund 101 Monroe St Denver CO 80206 Foreign State or Province: _____ Foreign Country: _____	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	Governor's Commission on Community Service 1059 Alton Way #123 Denver CO 80230 Foreign State or Province: _____ Foreign Country: _____	\$ 11,860	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	Bureau of Land Management 2850 Youngsfield Street Lakewood CO 80215 Foreign State or Province: _____ Foreign Country: _____	\$ 25,088	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	Colorado Fourteeners Initiative 710 10th Street, Suite 220 Golden CO 80401 Foreign State or Province: _____ Foreign Country: _____	\$ 8,160	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	Colorado State Parks - Rec Trails 1313 Sherman St #618 Denver CO 80203 Foreign State or Province: _____ Foreign Country: _____	\$ 16,990	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	Colorado State Parks 1313 Sherman St #618 Denver CO 80203 Foreign State or Province: _____ Foreign Country: _____	\$ 296,157	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization
Colorado Youth Corps Association

Employer identification number
84-1532028

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	Colorado Division of Wildlife 6060 Broadway Denver CO 80216 Foreign State or Province: _____ Foreign Country: _____	\$ 213,636	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	Colorado State Parks - OHV 1313 Sherman St #618 Denver CO 80203 Foreign State or Province: _____ Foreign Country: _____	\$ 142,744	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	REI 1416 Platte St Denver CO 80202 Foreign State or Province: _____ Foreign Country: _____	\$ 8,994	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	_____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization Colorado Youth Corps Association	Employer identification number 84-1532028
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry.)
 For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once—see instructions.) ▶ \$ 0

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____ For. Prov. Country	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
2	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____ For. Prov. Country	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
3	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____ For. Prov. Country	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
4	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____ For. Prov. Country	_____ _____ _____

Name of organization Colorado Youth Corps Association	Employer identification number 84-1532028
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry.)
 For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once—see instructions.) ▶ \$ 0

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
5	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>
For. Prov. Country	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
6	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>
For. Prov. Country	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
7	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>
For. Prov. Country	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
8	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>
For. Prov. Country	

Name of organization Colorado Youth Corps Association	Employer identification number 84-1532028
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry.)
 For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once—see instructions.) ▶ \$ 0

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
9	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
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For. Prov. Country			
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(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
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For. Prov. Country			
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(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
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For. Prov. Country			
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(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
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For. Prov. Country			

Form 990, Part III
Statement of Program Service Accomplishments

Organization's Primary Exempt Purpose:

The mission of the Colorado Youth Corps Association ("CYCA) is to develop and maintain statewide capacity of a network of locally operating youth conservation corps programs that work to preserve and enhance the environment.

Program Service Accomplishments:

a. Corps Support

\$ 697,485

- 1) Supported statewide youth corps participation to 900 youth at 11 independently operating youth conservation corps;
- 2) Provided land managers with 124 weeks of work throughout the state;
- 3) Coordinated \$682,832 in statewide fee-for-service contracts with public land managers
- 4) Provided 101 AmeriCorps education awards valued at \$112,753 to eligible youth corps participants.

b. Technical Assistance

102,430

- 1) Provided training to 120 crew leaders in technical skills, corps member development, leadership and environmental education skills.
- 2) Coordinated with the Colorado Outdoor Training Institute (COTI) for crew leader training. Corps crew leaders represent a third of all COTI trained crewleaders in the state.
- 3) Launched a pilot Conservation Corps Crewleader Certification program. Certified 5 crewleaders:

Total program expenditures \$ 799,915

COLORADO YOUTH CORPS ASSOCIATION
84-1532028
Year ended December 31, 2007

Form 990, Part II, Line 42 and
Form 990, Part IV, Lines 57a-c
Property and equipment, accumulated depreciation, and depreciation expense:

Asset Basis	Balance 12/31/2006	Additions	Disposals	Balance 12/31/2007
Vehicle	22,573	\$ -	\$ -	\$ 22,573
Computers and equipment	14,168	-	(1,966)	12,202
Leasehold Improvements	5,340	-	(5,340)	-
	\$ 42,081	\$ -	\$ (7,306)	\$ 34,775

Accumulated Deprec.	Balance 12/31/2006	Depreciation Expense	Disposals	Balance 12/31/2007
Vehicle	\$ 22,573	\$ -	\$ -	\$ 22,573
Computers and equipment	11,089	1,787	(1,966)	10,910
Leasehold Improvements	3,773	1,567	(5,340)	-
	\$ 37,436	\$ 3,354	\$ (7,306)	\$ 33,483

Net property and equipment	\$ 4,645		\$ 1,292
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COLORADO YOUTH CORPS ASSOCIATION

84-1532028

Year Ended December 31, 2007

LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Form 990, Part V, (Continued from Part V)

The following Board Members serve without compensation:

<u>Name and address</u>	<u>Title</u>	<u>Time</u>
Peter Tierney 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Chair	2 hours/month
Maelly Oropeza 225 E. 16th Ave, Ste 475 Denver, CO 80203	Chair-Elect	2 hours/month
Greg Clifton 225 E. 16th Ave, Ste 475 Denver, CO 80203	Past Chair	2 hours/month
Gerhard Holtzendorf 225 E. 16th Ave, Ste 475 Denver, CO 80203	Secretary/Treasurer	2 hours/month
Paul Peck 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Ken Brink 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Joe Higgins 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Matt Hamilton 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Jim Bensberg 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Gretchen Van De Carr 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Shanda Vangas 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month

COLORADO YOUTH CORPS ASSOCIATION
84-1532028
Year Ended December 31, 2007

Form 990, Part V, (Continued)

The following Board Members serve without compensation:

<u>Name and address</u>	<u>Title</u>	<u>Time</u>
John Overstreet 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Michelle Sturm 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Chris Wilson 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Mike McNeil 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month
Chris Nessel 225 E. 16th Ave, Ste 475 Denver, CO 80203	Board Member	2 hours/month

COLORADO YOUTH CORPS ASSOCIATION

84-1532028

Year Ended December 31, 2007

**Form 990, Part II, Line 22
Grants and Allocations**

<u>Recipient Name and Address</u>	<u>Purpose of grant or allocation</u>	<u>Amount</u>
Larimer County Youth Corps 3842 S. Mason Street Fort Collins, CO 80525	Conservation and stewardship projects in Colorado	\$ 28,487
Western Colorado Conservation Corps 735 South Ave Grand Junction, CO 81501	Conservation and stewardship projects in Colorado	\$ 84,390
Rocky Mountain Youth Corps P.O. Box 775504 Steamboat Springs, CO 80477	Conservation and stewardship projects in Colorado	\$ 127,272
Southwest Conservation Corps 120 Rock Point Drive, Unit B Durango, CO 81301	Conservation and stewardship projects in Colorado	\$ 146,647
Mile High Youth Corps 1801 Federal Blvd Denver, CO 80204	Conservation and stewardship projects in Colorado	\$ 85,458
Weld County Youth Conservation P.O. Box 1805 Greeley, CO. 80632	Conservation and stewardship projects in Colorado	\$ 15,750
Colorado Range Riders Youth Corps P.O. Box 1583 Sterling, CO 80751	Conservation and stewardship projects in Colorado	\$ 24,215
Colorado Legends and Legacies Youth Corps P.O. Box 85 Monument, CO 80132	Conservation and stewardship projects in Colorado	\$ 125,900
To Part II, Line 22		<u>\$ 638,119</u>

None of the recipients are individuals.