Paid

Preparer

Use Only

YEE LEE MCGEE

Firm's address 808 S.W.

		f the Treasury		not enter socia						80K	Open to Public Inspection
			lar year, or tax year		JUL 1,				JUN 30,	2018	
В	Check if	C Name of	f organization		0011	2017					ation number
	Addres Change	_	IS YOUTH P	ROGRAMS	INC.						
	Name change	Doing b	usiness as							<u>23-73</u>	345990
	Initial		r and street (or P.O.	box if mail is not	delivered to st	reet address)		Room/suite	E Telephon	e number	
	Final return/ termin-		N.E. COUC					<u> </u>		(503	
	ated Amend	City or t	town, state or prov	ince, country, a 97232	nd ZIP or for	eign postal c	ode		G Gross receip		15,137,176.
 	_Jreturn ∏Applica		LAND, OR and address of prin		NINIT C M	ODDOW		1	-	ordinates'	
	Lión pendin	Finantea	AS C ABOV	-	INNIS M	ORROW		- 1	H(b) Are all sub		<u> </u>
17	Гах∙ехе	empt status	X 501(c)(3)	501(c) () ⋖ (insert	no.) 49	47(a)(1)	or []52	7 If "No,"	attach a	list (see instructions)
			JANUSYOUT	H.ORG				<u> </u>	H(c) Group		
		organization:	X Corporation	Trust	Association	Other D	<u> </u>	L Yea	r of formation: 1	<u>.972 м</u>	State of legal domicile: OR
Pa	art I	Summary	<u> </u>								
ø	1 1	Briefly describ	be the organization	n's mission or m	ost significar	nt activities	SEE	SCHED	ULE O		
Activities & Governance			. —								
eru	2 (Check this bo	ox 🕨 🔛 if the	organization dis	scontinued its	s operations of	dispo		en Wee 25% or	its net as	sets
Š	3 1	Number of vo	iting members of th	ne governing bo	ody (Part VI, li	ne 1a)	1 -		······································	$\frac{3}{3}$	1.0
æ	1		dependent voting r		-		13-1	DET 1	4 2010	3 4	
es	5	Total number	of individuals emp	loyed in calend	ar year 2017	(Part V, line 2	器	DEC 1	4 2018	5 5	408
<u>₹</u>	6	Total number	of volunteers (esti	mate if necessa	ıry)		L		<u> </u>	[6	400
Act	7 a	Total unrelate	ed business revenu	e from Part VIII	, column (C),	line 12		OGDE	N, UT	7a	0.
	b	Net unrelated	business taxable	income from Fo	rm 990-T, lin	e 34				7b	<u> </u>
								ļ. <u>.</u>	Prior Yea		Current Year
ō	8	Contributions	and grants (Part V	/III, line 1h)					11,911,		12,752,483.
en	9 1	Program serv	ice revenue (Part V	/III, line 2g)				<u> </u>		481.	168,382.
Revenue	10	Investment in	come (Part VIII, co	lumn (A), lines 3	3, 4, and 7d)			<u> </u>		588.	457,402.
	1		e (Part VIII, column					<u> </u>	234		233,880.
	12	Total revenue	- add lines 8 throu	igh 11 (must eq	ual Part VIII,	column (A), li	ne 1 <u>2)</u>		12,406,		13,612,147.
	13	Grants and si	ımılar amounts pak	d (Part IX, colum	nn (A), lines 1	-3)		<u> </u>	982,	797.	1,257,026.
	14	Benefits paid	to or for members	(Part IX, colum	n (A), line 4)			<u> </u>		0.	0.
S	15	Salaries, othe	er compensation, e	mployee benefi	ts (Part IX, co	olumn (A), line	es 5-10)	· _	<u>8,639</u>		8,887,148.
SU:	16a	Professional f	fundraising fees (Pa	art IX, column (/	4), line 11e)			-		0.	0.
Expenses	b .	Total fundrais	sing expenses (Par	t IX, column (D)	, line 25) 📗	<u> </u>	<u>71,8</u>	330.			
9 ^m	17	Other expens	es (Part IX, column	n (A), lines 11a-1	11d, 11f-24e)			<u> </u>	3,014		2,888,891.
	18	Total expense	es Add lines 13-17	' (must equal Pa	art IX, column	(A), line 25)		_	<u> 12,637</u>		13,033,065.
	19	Revenue less	expenses Subtra	ct line 18 from l	ine 12				-230		<u>579,082.</u>
Net Assets or Fund Balances								<u></u>	eginning of Curr		End of Year
sset	20	Total assets ((Part X, line 16)					<u> </u>	<u>6,685</u>		6,525,028.
S S S S S S S S S S S S S S S S S S S	21	Total liabilities	s (Part X, line 26)					i i		570.	2,987,163.
컐	22	Y -	fund balances Su	ibtract line 21 fr	om line 20				2,957	141.	3,537,865.
	art II	Signatur				<u> </u>					
											/ knowledge and belief, it is
true	, correc	t, and complete	e. Declaration of prep	arer (other than o	fficer) is based	l on all informa	tion of v	vhich prepar	er has any knowl	edge.	
		Cignation	ro of officer		r/l a				Date	_	
Sig	n	▼ Signatur	re of officer	Wes 0). /\x1\				Date	17	-6-2018
Her	·e	T	<u> </u>		11/0/		<u></u>		10 No.	_	
		'	print name and title	Dennis			<u>- 760</u>	cutive	Directi		PTIN
		Print/Type pre	eparer's name		Preparer'	s signature	1		Date /	Check	_ ''''

SUITE 700

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

732001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.

PORTLAND, OR 97204

THIRD AVENUE,

▶ GARY MCGEE & CO.

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

go. 39

Phone no. (503)

222-2515

Form 990 (2017)

orm	990 (2017) JANUS YOUTH PROGRAMS, INC. 23-7345990 Page	<u>2</u>
Par	III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	<u>]</u>
1	Briefly describe the organization's mission	
-	JANUS YOUTH PROGRAMS IS A LEADER IN CREATING INNOVATIVE,	
	COMMUNITY-BASED SERVICES WHICH ENHANCE THE QUALITY OF LIFE FOR	_
	CHILDREN, YOUTH, AND FAMILIES. WE WORK IN PARTNERSHIP WITH OTHERS TO	_
		_
	CREATE A SAFE AND HEALTHY COMMUNITY.	_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
)
	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 X No)
	If "Yes," describe these changes on Schedule O	
ţ.	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	
la	(Code) (Expenses \$4, 431, 162. including grants of \$83,815.) (Revenue \$8, 259.)
	RESIDENTIAL SERVICES - SIX LONG AND SHORTER-TERM RESIDENTIAL PROGRAMS	
	PROVIDE MENTAL HEALTH SERVICES AND SPECIALIZED TREATMENT AND CARE FOR	
		—
	OREGON DEPARTMENT OF HUMAN SERVICES OR THE OREGON YOUTH AUTHORITY. THE	<u> </u>
	LONG-TERM GOAL OF JANUS RESIDENTIAL SERVICES IS TO FACILITATE A	
	SUCCESSFUL RETURN TO HOME AND FAMILY OR TO INDEPENDENT LIVING IN THE	
	COMMUNITY.	_
		_
		_
		_
4b	(Code) (Expenses \$ 4,278,479. including grants of \$ 462,314.) (Revenue \$ 110,233.	<u> </u>
+D	(Code) (Expenses \$ 4,278,479. including grants of \$ 462,314.) (Revenue \$ 110,253.) RUNAWAY AND HOMELESS YOUTH SERVICES - TEMPORARY SHELTER AND FAMILY	. ,
		_
		—
	RETURN TO HOME OR ALTERNATIVE COMMUNITY SETTING AND TO PROVIDE LINKAGE	—
	WITH ONGOING FOLLOW-UP SERVICES. ADDITIONAL PROGRAMMATIC SERVICES	—
	INCLUDE OPERATIONS OF THE RECEPTION CENTER, WHICH OFFERS LAW	_
	ENFORCEMENT AN ALTERNATIVE PLACEMENT TO A LOCKED SETTING FOR YOUTH WITH	_
	CURFEW VIOLATIONS, ACTIVE RUNAWAY REPORTS AND MISDEMEANORS.	_
	CONTINUED ON SCHEDULE O	
	HOMELESS SERVICES INCLUDE AN EXTENSIVE ARRAY OF HOMELESS YOUTH	_
	PROGRAMS, INCLUDING STREET OUTREACH, ASSESSMENT, EMERGENCY AND	_
4c	(Code) (Expenses \$ 2,068,062. including grants of \$ 700,547.) (Revenue \$ 8,717.	
••	INSIGHT TEEN PARENT PROGRAMS - AN ARRAY OF SERVICES PROVIDED TO YOUNG	- ′
	PARENTS AND THEIR CHILDREN AND PREGNANT TEENAGERS, INCLUDING CASE	
	MANAGEMENT DADENTING EDUCATION (CUDDODE COURCE CAPE CUDEDUTCED	—
	MANAGEMENT, PARENTING EDUCATION/SUPPORT GROUPS, SAFE SUPERVISED	—
	APARTMENT LIVING, AND SUPPORT TO ATTEND AND COMPLETE HIGH SCHOOL,	—
	OBTAIN A GED, OR WORK TOWARD EMPLOYMENT.	
		_
1.4	Other program services (Describe in Schedule O)	_
Ŧ u	700 000	
1.5		_
46	Total program service expenses ► 11,501,525. Form 990 (201	17)

Form	990	(2017)

Form 990 (2017)

JANUS YOUTH PROGRAMS,
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)?			1
'	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ü	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
٠	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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? If "Yes," complete Schedule D, Part VIII	11c	ļ	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	l		,,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e_	-	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)? If "Yes," complete Schedule D, Part X	11f	1	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	v	
_	Schedule D, Parts XI and XII	12a	Х	1
p	Was the organization included in consolidated, independent audited financial statements for the tax year?	106	ŀ	v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144	1	1
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
IJ	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I	17_		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? If "Yes," complete Schedule G, Part II	18	X_	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
		Earn	. aan	(2017

Form 990 (2017)

JANUS YOUTH PROGRAMS, INC.

Part IV Checklist of Required Schedules (continued)

20a by the organization operate one or more hospital facilities? If "Yes," complete Schedule II by If "yes to the 20b, did the organization states in copy of its audied financial statements to the return? 21 bid the organization report more than \$5,000 of grants or other assistance to any dimestic organization or domestic operation or any of the complete Schedule I, Parts I and III 22 bid the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), lane 2" If "Yes," complete Schedule I, Parts I and III 23 bid the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), lane 2" If "Yes," complete Schedule I, Parts I and III 24 bid but the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the test day of the year, that was issued after December 31, 2002" If "Yes," answer lines 24th through 24d and complete Schedule K. If "Not" ye to lane 25e 35 bid the organization maintain an escrive account other than a refunding accrow at any time during the year to defease any tax-exempt bonds? 36 bid the organization maintain an escrive account other than a refunding accrow at any time during the year? 37 bid the organization maintain an escrive account other than a refunding accrow at any time during the year? 38 Section 601(c)(3), 601(c)(4), and 601(c)(5) organizations. Did the organization language in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 38 bit the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, direction, trustee, key employees, or dequalified person in a prior year, and that the transaction with an disqualified person in a prior year, and that the transaction with a contribution of proper prop		•		Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 2? If "Ves," complete Schedule I, Parts I and III 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 2? If "Ves," complete Schedule I, Parts I and III 23 Did the organization neares" ver's to Part VI, lise 2. 24 Did the organization or the ver's to Part VI, lise 2. 25 Schedule I, I "In Vigo Io line 25 If December 31, 2002" If "Yes," answer lines 240 through 24d and complete Schedule III VI "In Vigo Io line 25 If Did the organization maintain an ascrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 26 Did the organization maintain an ascrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 27 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 28 Section 501(5)3, 501(6)4), and 501(6)29 organizations. Do the organization engage in an excess benefit transaction with a disqualated person uning the year? 28 If the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, leve employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Part II 29 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, leve employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Part IV 29 Did the organization report as grant or other assistance to an officer, director, trustee, leve employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35%	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X_
tomestic government on Part IX, column (A), line 17 if 17/es," complete Schedule I, Parts I and if I 21 Did the organization report mere than 55,000 of genits or other assistance to or for domestic individuals on Part IX, column (A), line 27 if 17/es," complete Schedule I, Parts I and if II 23 Did the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part IVI and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, Part IVI and the organization missal any proceeds of itax-exempt bonds beyond a temporary period exception? 24b Did the organization missal any proceeds of tax-exempt bonds beyond a temporary period exception? 25c Bottle organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 25d Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 25d Section 501(6)(3), 501(6)(4), and 501(6)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part IVI b Is the organization aware that the graged main excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part IVI is 18 to enganization and the tax engaged main excess benefit transaction with one or septice stream of the properties of the organization section of the properties of the properties of the organization and the transaction of the organization explored in the graged of the organization section of the properties of the prope	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b_		
22 X 23 bit the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, counting (A), ine 22 if "Yes," complete Schedule I. Part I and III II I	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), line 2" II" "Yes," complete Schedule I, Parts I and III and former officers, directors, trustees, key employees, and highest compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? II "Yes," complete Schedule I. Part III and to represent the last day of the year, that was issued after December 31, 2002? II" "Yes," answer lines 24b through 24d and complete Schedule II" Imme 25a 24b D of the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b D of the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d D of the organization invest any proceeds of tax-exempt bonds seven any time during the year to defease any tax-exempt bonds? 4b of the organization invest any excess possible transaction with a disqualified person during the year? 4b Is the organization exemption of the transaction with a disqualified person during the year? 4b Is the organization expense in the transaction has not been reported on any of the organization's profit in the transaction has not been reported on any of the organization's profit in the gradient and that the transaction has not been reported on any of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 25b U the organization provide a grant or other assistance to an officer, director, trustee, every employee? If "Yes," complete Schedule L, Part II 27b U drive organization provide a grant or other assistance to an officer, director, trustee, or key employees (or a family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (domestic government on Part IX, column (A), line 19 if "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? // "Yes," complete Schedule / 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the fast day of the year, that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 42a	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule If "I'm", or to time 25a 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception? 24b Did the organization and as an "on behalf of" issuer for bonds outstanding any time during the year to defease any tax-exempt bonds? 24c Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization with a disqualified person of uning the year? 4dd Did the organization with a disqualified person during the year? 4dd Did the organization with a disqualified person during the year? 4dd Did the organization with a disqualified person during the year? 4dd Did the organization with a disqualified person of uning the year? 4dd Did the organization with a disqualified person of the year and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or chaqualified persons? If "Yes," complete Schedule L, Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee threeds, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$250,000 in non-cash contribu		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
Schedule / 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Did the organization have a tax-exempt bond susie with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a 5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 6 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 7 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 8 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization ware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 9 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, substantial contributor or employee thereof, a parts election committee member, or to a 359 controlled entity or family member of a unit error, and exceptions? 9 A Canny or employee thereof, a parts election committee member, or to a 359 controlled entity or family member of a unit error, or employee? If "Yes," complete Schedule L, Part IV instructions for applicable fring thresholds, conditions, and exceptions? 9 A Canny of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fring thresholds, conditions, and exceptions? 10 Did the organization receive more than \$25,000 in non-cash controlutions? If "Yes," complete Schedule L, Part IV instructions of th		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	}		
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b	If at least one is reported on line 2a, did the organization file all required federal employment tax returnations. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction of the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule at any time during the calendar year, did the organization have an interest in, or a signature or other inancial account in a foreign country (such as a bank account, securities account, or other financial of "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial of Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year? Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction from the second of the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	urns? as) e O r authoriti account Accounts action?	y over, a t)? s (FBAR)	3a 3b 4a 5a	X	x
3a b 4a / 6 5a 5a 5a 5a 5a 5a 5a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction of the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule at any time during the calendar year, did the organization have an interest in, or a signature or other inancial account in a foreign country (such as a bank account, securities account, or other financial of "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial of Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year? Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction of the second of the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	e O r authorit I account Accounts action?	s (FBAR)	3a 3b 4a 5a		x
3a b 4a / b 5a 5a 5a 5a 5a 5a 5a	Old the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule at any time during the calendar year, did the organization have an interest in, or a signature or other inancial account in a foreign country (such as a bank account, securities account, or other financial if "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial in Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction of the second of the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	e O r authorit I account Accounts action?	s (FBAR)	3b 4a 5a		x
b 4a / b 5a	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule at any time during the calendar year, did the organization have an interest in, or a signature or other inancial account in a foreign country (such as a bank account, securities account, or other financial if "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial in Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	r authority I account Accounts action? the organ	s (FBAR)	3b 4a 5a		x
4a / b / 5a /	At any time during the calendar year, did the organization have an interest in, or a signature or other inancial account in a foreign country (such as a bank account, securities account, or other financial of "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial of Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans of "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	r authority I account Accounts action? the organ	s (FBAR)	4a 5a		<u>x</u>
b (inancial account in a foreign country (such as a bank account, securities account, or other financial of "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial of Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year? Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans of "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	Accounts action? the organ	s (FBAR)	 5a	****	<u>x</u>
ь : 5а ^ч	f "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans of "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? of "Yes," did the organization include with every solicitation an express statement that such contributions.	Accounts action?	s (FBAR)	 5a		<u>x</u>
5a \	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans of "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	action? the orgar				
5a \	Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans f "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	action? the orgar				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans f "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did taken the organization have annual gross receipts that are normally greater than \$100,000, and did taken the organization include with every solicitation an express statement that such contributions?	action? the orgar		5b		
	f "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contribu	the orgar				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contribu			5c		
	any contributions that were not tax deductible as charitable contributions? f "Yes," did the organization include with every solicitation an express statement that such contribu		nization solicit			
	· · · · · · · · · · · · · · · · · · ·			6a_		X
b	many makkey de dyskible O	itions or	gıfts			
	vere not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
a	old the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices pri	ovided to the payor?	7a	X	
b	f "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	was requi	ıred			
•	o file Form 8282?			7c		X
ď	f "Yes," indicate the number of Forms 8282 filed during the year	7d				
e l	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract	?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conf			7f		X
_	f the organization received a contribution of qualified intellectual property, did the organization file F			7g	N/	
	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz		• -	7h	N/	Α
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by the	N/A			ļ
,	sponsoring organization have excess business holdings at any time during the year?			8		ļ
	Sponsoring organizations maintaining donor advised funds.		37 / 3			
	Oid the sponsoring organization make any taxable distributions under section 4966?		N/A	9a		-
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/A	9b	-	-
	Section 501(c)(7) organizations. Enter	11				
	nitiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			ļ	
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders N/A	1445				
		11a	·	1		
	Gross income from other sources (Do not net amounts due or paid to other sources against	11b				
	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Forn		· · · · · · · · · · · · · · · · · · ·	12a		
	/_	12b		120		
	f "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A Section 501(c)(29) qualified nonprofit health insurance issuers.	120		1	1	
	s the organization licensed to issue qualified health plans in more than one state?		N/A	13a		1
	Note. See the instructions for additional information the organization must report on Schedule O		/	1.50		
	Enter the amount of reserves the organization is required to maintain by the states in which the				ŀ	
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c		1		
	Did the organization receive any payments for indoor tanning services during the tax year?	<u> </u>		14a	l	Х
	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ıle O		14b		

JANUS YOUTH PROGRAMS, INC. 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 in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 18 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 18 **b** Enter the number of voting members included in line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х 13 Did the organization have a written whistleblower policy? 13 X 14 Х 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15a 15b X **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a 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 16b exempt status with respect to such arrangements?

S	ec	tic	n	C.	Disc	losure	ļ
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17 List the states with which a copy of this Form 990 is required to be filed

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

Own woherto	Anothor's website	Y Upon request	Other (explain in Schedule	\sim
L I Own website	I Another's website	I X I Upon request	I _I Otner lexplain in Schedule	U

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

	statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records	>

BEV BACKA - (503) 542-4613 97232 707 N.E. COUCH STREET, PORTLAND, OR

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week	(do		(C Posi heck i ss per	ition	than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) TODD ALLAIS	1.00	x						0.	0.	0.
DIRECTOR	1.00	┢				_	-		<u> </u>	
(2) KEVIN HUISH	1.00	X						0.	0.	0.
DIRECTOR	1.00	^	├─			-	<u> </u>	- 0.		
(3) GREG BAUER	1.00	X						0.	0.	0.
DIRECTOR	1.00	^	╁			_				
(4) MELISSA BAUER	1.00	X						0.	0.	0.
DIRECTOR (5) JESSIE FAN	1.00	<u> </u>		_			\vdash			
DIRECTOR	1.00	X						0.	0.	0.
(6) THOMAS FINK	1.00	122								
DIRECTOR	1,00	x						0.	0.	0.
(7) DAVID R. JARMAN	1.00					-				
DIRECTOR		x						0.	0.	0.
(8) HIRDESH LAL	1.00		1							
DIRECTOR		x						0.	0.	0.
(9) CHAD PAULSON	1.00									
DIRECTOR	_	X]			0.	0.	0.
(10) AMY JOSEPH PETERSON	1.00								-	
DIRECTOR		X			<u> </u>			0.	0.	0.
(11) BARRY SCHRIMSHER	1.00									
DIRECTOR		X					_	0.	0.	0.
(12) JOHN STAGEBERG	1.00									
DIRECTOR		X	lacksquare		<u> </u>	<u> </u>		0.	0.	0.
(13) CHRIS WOLFE	1.00	1							_	
DIRECTOR		X	<u> </u>			<u> </u>		0.	0.	0.
(14) STEPHEN MCCAMMON	1.00	4							•	
PAST PRESIDENT		X	<u> </u>	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(15) TIM COLTON	1.00	1							_	,
PRESIDENT	1 00	X	₩	X	<u> </u>	├-	├-	0.	0.	0.
(16) PETER BEYER	1.00		}	,				_	_	_
VICE-PRESIDENT	1 00	X	\vdash	X	\vdash	├	\vdash	0.	0.	0.
(17) SUE CAMPO	1.00			3,5				0.	0.	_0.
TREASURER		X	1	X	Ц	1	L			Form 990 (2017)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hı	ghe	st C	Compensated Employed	es (continued)		
' (A) Name and title	(B) Average hours per	(do	not c	Pos heck ss pe	c) ition more irson	1 than is bot	one h an	(D) Reportable	(E) Reportable compensation	,	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS		other compensation from the organization and related organizations
(18) NANCY HURLEY SECRETARY	1.00	X		х				0.		0.	0.
(19) DENNIS L. MORROW	40.00										
EXECUTIVE DIRECTOR		1		x				169,825.		0.	11,163.
(20) BEVERLEY BACKA	40.00									\neg	
FISCAL DIRECTOR				x	ĺ	ĺ		92,022.		0.	8,260.
TISCHE BIRECTOR				-	_	T		<u> </u>			<u> </u>
						İ				-	
			-								
		-				T	-			\dashv	
			_		-	-	-			\dashv	
			_							_	
										_	
1b Sub-total				·		<u> </u>		261,847.		0.	19,423.
c Total from continuation sheets to Part VI	I. Section A						•	0.		0.	0.
d Total (add lines 1b and 1c)	,						•	261,847.		0.	19,423.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	bove	e) wł	no r		.000 of reportable		
compensation from the organization									,		Yes No
3 Did the organization list any former officer,		ıste	e, ke	y er	nplo	yee	, or	highest compensated ei	mployee on		
line 1a? If "Yes," complete Schedule J for s										- }	3 X
4 For any individual listed on line 1a, is the su									the organization	- 1	
and related organizations greater than \$150			•							- }	4 X
5 Did any person listed on line 1a receive or a	•				•		elat	ted organization or indivi	dual for services		
rendered to the organization? If "Yes," com	<u>plete Schedul</u>	e <i>J f</i>	or si	ıch _	pers	son_		· -			5 X
Section B. Independent Contractors											
Complete this table for your five highest co the organization. Report compensation for										oensa	ation from
(A)								(B)			(C)
Name and business	address					_		Description of s	ervices	<u>C</u>	ompensation
SEXUAL ASSAULT RESOURCE (CENTER,	49	900) {	3.1	W .					
GRIFFITH DRIVE, SUITE 100), BEAVI	CR	101	١,	O	<u>R</u>		SOCIAL SERVI	CES		<u>326,983.</u>
NJP CONSTRUCTION LLC									1		
P.O. BOX 3804, TUALATIN,	OR 9706	<u>52</u>						GENERAL CONT	RACTOR		237,556.
									•		
					_		_				
2 Total number of independent contractors (i	ncluding but n	ot lii	mite	d to	tho	se lis	stec	d above) who received m	ore than		
\$100,000 of compensation from the organi	zation 🕨				- 2	2					
										1	Form 990 (2017)

		Check if Schedule O conta	ains a response	or note to any lir	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a	7,119,				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
S, G		Fundraising events	1c	53,217,				
# F		Related organizations	1d					
S,E		Government grants (contributi	 	11,829,754.				
<u>i</u> Sis	f	All other contributions, gifts, gran	, ,					
the st	-	similar amounts not included above	1 1	862,393.				
ĞĒ,	g Noncash contributions included in lines 1a-1f \$		333,172.					
a Co	h Total. Add lines 1a-1f			>	12,752,483,			P.X.A.VAIVAAA
	•			Business Code	4 - 1/2 1/2 Vel 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2			MENTAL AND AN
ĕ	2 8	CONTRACT REVENUE	-	624100	168,382.	168,382.	•	
Program Service Revenue	t							
S	•	· · · · · · · · · · · · · · · · · · ·		, ,				
eve	(<u> </u>	,				_	
og R	•	•						
ď	f	All other program service reve	nue					`
	g	Total. Add lines 2a-2f	•	>	168,382,		とは熱容器は明文の	A.44. 27. 28.64
	3	Investment income (including	dividends, intere	est, and	-	,		
		other similar amounts)		>	1,728.			1,728,
	4	Income from investment of tax	k-exempt bond p	roceeds	,			
	5	Royalties		<u> </u>				
	,	,	(ı) Real	(II) Personal				
•	6 a	Gross rents						
	` t	Less rental expenses		-				
	•	Rental income or (loss)	>				<u> </u>	100000 100000 100000 100000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10
	c	Net rental income or (loss)		· . •	•			
	7 8	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		1,338,954.				
i	t	Less cost or other basis						
		and sales expenses		883,280,				
	c	Gain or (loss)		455,674,	23423333	\$200 BEST 100 BEST 10	2992 N. 2423	
·	C	t Net gain or (loss)			455,674.		*,	455,674.
<u>a</u>	8 a	a Gross income from fundraising	g events (not					
en		including \$ 53	<u>,217.</u> of					
ě		, contributions reported on line	1c) See					
er		Part IV, line 18	a¸	64,844.				
Other Reven		Less direct expenses	b	41,495.				
_		Net income or (loss) from fund	-	<u> </u>	23,349.		520 240000 2006 200 200	23,349.
	9 a	a Gross, income from gaming ac	tivities See					
		Part IV, line 19	а	,				
		Less. direct expenses	b	L	44 38 /2 - 3 5 3 6 5 3 C			
		Net income or (loss) from gam			24 C4286 C C 70 G 70 C07 (1997)	200 104500 204000000 10450000000	Trave excise segments	To allocate delicate at 1 hail
	10 a	a Gross sales of inventory, less	returns					
		and allowances	a	772,781.				
		Less cost of goods sold	b	600 254.		<u> </u>	CO. 30-1875 S. F. W. (ST. C.)	<i>2007</i>
		Net income or (loss) from sale		D	172 <u>527.</u>	172.527.		
	4.4	Miscellaneous Revenu	<u>e</u>	Business Code		<u> </u>	4.334	التناسات المناسات المناسطة بمارتوارات
		MISCELLANEOUS		900099	38,004.			38,004.
	'	·					-	
		al All other revenue			-	,	-	
		Total. Add lines 11a-11d			38,004.	美国人的产品等 设置	93(%) 274 AXXX	NAMES OF THE PARTY
	12	Total revenue. See instructions			13 612 147	340_909	0.	518.755

Part IX Statement of Functional Expenses JANUS YOUTH PROGRAMS, INC.

Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, Total expenses I Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, individuals See Part IV, line 22 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(1)) and persons plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Payroll taxes Toes for services (non-employees) Management and general expenses Program service expenses Management and general expenses Fundraising expenses 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 285, 541. 285, 541. 285, 541. 285, 541. 285, 541. 285, 541. 123, 340. 123, 340. 124, 673. 126, 0274. 97, 390. 7, 016. 1, 868. 126, 0274. 97, 390. 7, 016. 1, 868. 127, 026. 1285, 541. 1285, 541. 129, 706. 1285, 7541. 129, 706. 1285, 7541. 129, 706. 1285, 7541. 129, 706. 1285, 7541.
Total expenses Program service expenses Programment Program service Program s
and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 1, 257, 026. 285, 541. 285, 541. 521, 828. 123, 340. 106, 274. 97, 390. 7, 016. 1, 868. 786, 008. 771, 335. 14, 673. 709, 726. 548, 023. 150, 920. 10, 783. 11 Fees for services (non-employees) a Management b Legal 47, 282. 31, 312. 15, 970. 80, 770.
2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 1, 257, 026. 1, 257, 026. 285, 541. 285, 541. 285, 541. 521, 828. 123, 340. 6, 999, 599. 6, 354, 431. 521, 828. 123, 340. 106, 274. 97, 390. 7, 016. 1, 868. 786, 008. 771, 335. 14, 673. 709, 726. 548, 023. 150, 920. 10, 783. 14, 673. 709, 726. 548, 023. 150, 920. 10, 783. 14, 673. 709, 726. 548, 023. 150, 920. 10, 783.
Individuals See Part IV, line 22 1,257,026. 1,257,026.
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Top ayroll taxes Management Legal Accounting Accounting
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting
individuals See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 7 Payroll taxes 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting
Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 285,541. 285,541.
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 10 Payroll taxes 11 Fees for services (non-employees) 10 Management 10 Legal 11 Legal 12 Accounting 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541. 285,541.
trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting 285,541. 285,541. 285,541. 285,541. 285,541. 285,541.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting 6,999,599. 6,354,431. 521,828. 123,340. 7,016. 1,868. 771,335. 709,726. 548,023. 150,920. 10,783.
persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting
persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting
7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting 6,999,599. 6,354,431. 521,828. 123,340. 106,274. 97,390. 7,016. 1,868. 786,008. 771,335. 14,673. 709,726. 548,023. 150,920. 10,783.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting 106,274. 97,390. 7,016. 1,868. 1786,008. 771,335. 14,673. 1979,726. 548,023. 150,920. 10,783.
section 401(k) and 403(b) employer contributions) 106,274. 97,390. 7,016. 1,868. 9 Other employee benefits 786,008. 771,335. 14,673. 10 Payroll taxes 709,726. 548,023. 150,920. 10,783. 11 Fees for services (non-employees) 47,282. 31,312. 15,970. a Management 80,770. 80,770.
9 Other employee benefits 786,008. 771,335. 14,673. 10 Payroll taxes 709,726. 548,023. 150,920. 10,783. 11 Fees for services (non-employees) a Management b Legal 47,282. 31,312. 15,970. c Accounting 80,770. 80,770.
10 Payroll taxes 709,726. 548,023. 150,920. 10,783. 11 Fees for services (non-employees) a Management b Legal 47,282. 31,312. 15,970. c Accounting 80,770. 80,770.
11 Fees for services (non-employees) a Management b Legal
a Management b Legal 47,282. 31,312. 15,970. c Accounting 80,770. 80,770.
b Legal 47,282. 31,312. 15,970. 80,770.
c Accounting 80,770.
d Lobbying
Defendant of the second of the
e Professional fundraising services. See Part IV, line 17
f Investment management fees
g Other (If line 11g amount exceeds 10% of line 25,
column (A) amount, list line 11g expenses on Sch 0.) 551,424. 533,911. 17,513.
12 Advertising and promotion 13 Office expenses 199,933. 159,052. 38,009. 2,872.
14 Information technology 138,140. 83,414. 53,303. 1,423. 15 Royalties
16 Occupancy 725,114. 650,140. 66,808. 8,166.
17 Travel 135,808. 125,966. 5,061. 4,781.
18 Payments of travel or entertainment expenses
for any federal, state, or local public officials
19 Conferences, conventions, and meetings 5, 370. 2,008. 181. 3,181.
20 Interest 105, 960. 94, 101. 11, 859.
21 Payments to affiliates
22 Depreciation, depletion, and amortization 218,010. 217,176. 834.
23 Insurance 79,139. 72,048. 6,995. 96.
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)
a PROGRAM SUPPLIES 447,834. 434,715. 12,528. 591.
b OTHER 154,107. 69,477. 84,574. 56.
c 232/1077 03/1777 01/07/17
d
e All other expenses
25 Total functional expenses. Add lines 1 through 24e 13,033,065. 11,501,525. 1,359,710. 171,830.
26 Joint costs Complete this line only if the organization
reported in column (B) joint costs from a combined
educational campaign and fundraising solicitation.
Check here Infollowing 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 End of year 903,063. 132,381 Cash - non-interest-bearing <u>329,879.</u> 365,849. 2 Savings and temporary cash investments 2 57,350. 3 Pledges and grants receivable, net 3 0. 1,426,559. 1,491,861. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 Inventories for sale or use R 200,238. 2<u>09,280.</u> Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 6,926,286. basis Complete Part VI of Schedule D 10a 4,539,304. 3,504,820. **b** Less accumulated depreciation 3,421,466. 10b 10c Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 investments - program-related See Part IV, line 11 13 14 Intangible assets 14 50,155. 15 Other assets See Part IV, line 11 15 6,525,028. 6,685,711 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,131,876. 869,413. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 349,951. 97,513. Deferred revenue 19 19 20 20 Tax-exempt bond liabilities 21 , Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 2,499,181. 1,767,799. Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 3,728,570. 2,987,163. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,480,223. <u>2,995,019.</u> Unrestricted net assets 27 527,846. 461,918. 28 Temporarily restricted net assets 28 15,000. 15,000. Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 2,957,141 3,537,865. 33 33 Total net assets or fund balances 6,685,711 6,525,028. Total liabilities and net assets/fund balances

orm	1990 (2017) JANUS YOUTH PROGRAMS, INC.	23-	<u>734599</u>	00	Pag	_{je} 12
	rt 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	13,6	<u> 12</u>	<u>, 1</u>	<u>47.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,0	33	,06	<u>65.</u>
3	Revenue less expenses Subtract line 2 from line 1	3		79	, 08	<u>82.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,9	<u> 57</u>	,14	<u>41.</u>
5	Net unrealized gains (losses) on investments	5		1	, 64	<u>42.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			_	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	l				
	column (B))	10	3,5	<u> 37</u>	<u>, 8 (</u>	<u>65.</u>
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					<u>ப</u>
			_	_ Y	es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				-	Į
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	_	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				4
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			_ _		<u></u>
þ	Were the organization's financial statements audited by an independent accountant?		_2	b 2	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both					1
	X Separate basis Consolidated basis Both consolidated and separate basis					
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		_	_	
	review, or compilation of its financial statements and selection of an independent accountant?			<u>:c 2</u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud		<u>- -</u>		
	Act and OMB Circular A-133?		_	a Z	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud		_	.	
	or guides, avalage why in Cahadula O and describe any atoms taken to undergo auch audita			. I	Y I	

Form **990** (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

2017
Open to Public Inspection

Employer identification number Name of the organization 23-7345990 JANUS YOUTH PROGRAMS, Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g _____ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (vi) Amount of other (I) Name of supported (III) Type of organization (v) Amount of monetary in your governing document (described on lines 1-10 support (see instructions) support (see instructions) organization above (see instructions))

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)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received (Do not								
	ınclude any "unusual grants.")	9,972,980.	10,144,683.	11,305,760.	11,911,920.	12,752,483.	56,087,826,		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	9,972,980,	10,144,683.	11,305,760,	11,911,920.	12,752,483.	56,087,826.		
5			, , , ,						
	by each person (other than a								
	governmental unit or publicly	1							
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)								
6	Public support. Subtract line 5 from line 4						56 087 826		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total		
	Amounts from line 4	9,972,980.	10,144,683.	11,305,760,	11,911,920.	12,752,483.	56,087,826,		
8	Gross income from interest,	, ,				-			
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	160.	245.	195.	1,588.	1,728.	3,916.		
9	Net income from unrelated business								
•	activities, whether or not the								
	business is regularly carried on		-						
10	Other income Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI)	16,905.	22,607.	9,004.	23,967.	38,004.	110,487.		
11	Total support. Add lines 7 through 10						56,202,229.		
	Gross receipts from related activities,	etc (see instruction	ons)			12 4	,992,209.		
	First five years. If the Form 990 is for	•	•	d. fourth, or fifth ta	x vear as a section		<u> </u>		
	organization, check this box and stor	_		.,	•	(/, /	▶ □.		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage						
14	Public support percentage for 2017 (I	ıne 6, column (f) dı	vided by line 11, c	olumn (f))		14	99.80 %		
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	99.52 %		
	33 1/3% support test - 2017. If the			n line 13, and line 1	14 is 33 1/3% or n	nore, check this bo	x and		
	stop here. The organization qualifies						$\triangleright \mathbf{X}$		
b	33 1/3% support test - 2016. If the c	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box		
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation					
17a	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac								
	meets the "facts-and-circumstances"								
b	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, ch	eck this box and	st <mark>op here.</mark> Explain	in Part VI how the			
	organization meets the "facts-and-circ	cumstances" test	The organization o	ualifies as a public	cly supported orga	anızatıon	▶□		
18	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

Schedule A (Form 990 or 990-EZ) 2017 JANUS YOUTH PROGRAMS, INC. 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

Se	ction A. Public Support	now, please com	piete Part II)				
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and			,,			/
	membership fees received. (Do not			1			ľ
	include any "unusual grants ")						
2	Gross receipts from admissions,			i			
•	merchandise sold or services per-			1			
	formed, or facilities furnished in			1			
	any activity that is related to the organization's tax-exempt purpose			1			
3	Gross receipts from activities that			1	 	/	
•	are not an unrelated trade or bus-			1		ĺ	
	iness under section 513			1			
_				1	 /- -		
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to			1			
	or expended on its behalf			<u> </u>	 		
5	The value of services or facilities			1			
	furnished by a governmental unit to			1	/		
	the organization without charge				/		
6	Total. Add lines 1 through 5					<u>-</u>	
7 a	Amounts included on lines 1, 2, and			/ /			
	3 received from disqualified persons				<u> </u>	<u> </u>	
b	Amounts included on lines 2 and 3 received			/	N		
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the				1		
	amount on line 13 for the year]\		
c	: Add lines 7a and 7b			1	1		
8	Public support. (Subtract line 7c from line 6)				1		
	ction B. Total Support			/			
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		/				
10a	Gross income from interest,		/				
	dividends, payments received on		/				
	securities loans, rents, royalties, and income from similar sources				\		
b	Unrelated business taxable income		/		1		
_	(less section 511 taxes) from businesses		/		\		
	acquired after June 30, 1975		/]			
,	Add lines 10a and 10b		' '		 	-	
	Net income from unrelated business		 		' ' '	<u>-</u> .	
-	activities not included in line 10b,		/		\		
	whether or not the business is		/		\ \		
12	regularly carried on Other income Do not include gain		+/		 		
12	or loss from the sale of capital		1/	Ĺ	- \		
46	assets (Explain in Part VI)		/		 		
	Total support (Add lines 9, 10c, 11, and 12)			<u> </u>	<u> </u>		<u> </u>
14	First five years. If the Form 990 is for	the organization	s first, second, thir	d, fourth, or fifth t	ax year as a section	n 501(c)(3) organiz	ation,
<u></u>	check this box and stop here	- C				<u> </u>	
	ction C. Computation of Publi						
	Public support percentage for 2017 (III	N .	-	column (f))		15.	%
	Public support percentage from 2016					16 \	%
	ction D. Computation of Inves						
	Investment income percentage for 20	2		ne 13, column (f))		17 \	%
	Investment income percentage from 2					18 \	%
19a	33 1/3% support tests - 2017. If the	- 1				\	17 is not
	more than 33 1/3%, check this box an	id stop here. The	e organization qual	ifies as a publicly	supported organiza	ation	
b	33 1/3% support tests - 2016. If the	organızatıçın dıd r	not check a box or	line 14 or line 19a	a, and line 16 is mo	re than 33 1/3%,	and
	line 18 is not more than 33 1/3%, chec	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	rted organization	▶□
20	Private foundation. If the organization	ı dıd not check a	box on line 14, 19	a, or 19b, check ti	his box and see ins	tructions	

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

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

	Yes	
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
	"	
there are a		
5a		
5b 5c		
Japan Jarahan Maria		
6		
7		
8		
9a		
9b_		
9c		
10a		
10b		

Sche	edule A (Form 990 or 990-EZ) 2017 JANUS YOUTH PROGRAMS, I	NC.		23-7345990 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov 20, 1970 (explain	in Part VI) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	omplete Sec	tions A through E	· · · · · · · · · · · · · · · · · · ·
Sect	ion 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	- <u></u> ,	
3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_ 5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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)			
а	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c	<u> </u>	
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			-
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7_		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5 Income tax imposed in prior year

instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

5

	dule A (Form 990 or 990 EZ) 2017 JANUS YOUTH P			3-7345990 Page 7
P ai	Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	,
Sect	ion D - Distributions			Current Year
<u> </u>	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	· <u> </u>	, , , , , , , , , , , , , , , , , , ,	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	18	,
4	Amounts paid to acquire exempt-use assets	<u></u> _		
5	Qualified set-aside amounts (prior IRS approval required)	,		
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6		·	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e ,	,
	(provide details in Part VI) See instructions		·	
9	Distributable amount for 2017 from Section C, line 6	***		
10	Line 8 amount divided by line 9 amount	1		
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	经现代的证据		
2	Underdistributions, if any, for years prior to 2017 (reason-		,	
	able cause required- explain in Part VI) See instructions		v	
_3	Excess distributions carryover, if any, to 2017	为心经经验的	A 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A THE STANDARD WAS A
а	以中华的大学的大学的大学的大学的大学的大学的大学的大学的大学的大学的大学的大学的大学的		造組织等對於於於於於	CARRACTUS MANY
_ b	From 2013	的機能對於沒有物質的流過	常常是沙松公子(花类)	物於公安公司為公司的
С	From 2014 .	がはまなくつか、たんというの	THE RESERVE THE EXAMPLE	**************************************
ď	From 2015	《新》等人人心教學學樣樣		55% 经营业公司
е	From 2016	をおける。これが必然後を認	透影型的多数的影響	學學學學學學學
f	Total of lines 3a through e		からとれて呼いな変感が	经验的经验的现在分词
g	Applied to underdistributions of prior years	数は対対機の必要を行う		MESTARIE SMERTE
<u>h</u>	Applied to 2017 distributable amount		医生态的现在分词	
i_	Carryover from 2012 not applied (see instructions)		经银行的经济经济关系经验	KANS IT HER DESIGNATION OF THE PERSON
i_	Remainder Subtract lines 3g, 3h, and 3i from 3f			THE STATE OF THE S
4	Distributions for 2017 from Section D,			
	line 7 \$			4. C.
_ <u>a</u>	Applied to underdistributions of prior years		AND	
_ <u>b</u>	Applied to 2017 distributable amount			0.20 2.02
_ <u>c</u>	Remainder Subtract lines 4a and 4b from 4	E THE STATE OF THE PERSON OF	经验验的基本证券的	经安全的 。在1000年6月
5	Remaining underdistributions for years prior to 2017, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions		760 6 Lt. 15, 2898 24 1 24 100 . An 400 10.	
6	Remaining underdistributions for 2017 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			the properties and book are to the properties of the first
7	Excess distributions carryover to 2018. Add lines 3j	*.		
	and 4c	NOT JULIAN SERVICE OF THE RESIDENCE		\$ 250 000 000 000 000 000 000 000 000 000
8	Breakdown of line 7	2865 4725 (F. 1884) KW		2000 100 100 100 100 100 100 100 100 100
	Excess from 2013			
	Excess from 2014			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Excess from 2015			100 100 100 100 100 100 100 100 100 100
_ <u>d</u>	Excess from 2016		· 建成 发达 公共等级的	中人公司公司公司

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

Part VI	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)										
SCHEDI	JLE A.	PART	II. L	INE 10	EXPL	ANATTON	FOR	OTHER	INCOME:		
					_	<u> </u>	201	<u> </u>	111001121		
MISCEL	LANEO	US REV	ENUE	(\$110,4	187)			·			
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Schedule A (Form 990 or 990-EZ) 2017 JANUS YOUTH PROGRAMS, INC.

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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 **Open to Public** Inspection

Name of the organization

Employer identification number

Pa	rt I Organizations Maintaining Donor Advise		le or Accounts Complete if the
Га			is of Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Im	e b (a) Donor advised funds	(b) Funds and other accounts
		(a) Donor advised failus	(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		<u> </u>
5	Did the organization inform all donors and donor advisors in v		
	are the organization's property, subject to the organization's	-	└── Yes └── No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpos	
—	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org		, Part IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	storically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ed conservation contribution in the form	n of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rela	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, handling of	f
	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 co	nservation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserv	ation easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describe	s the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or 6	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemen	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of p	ublic 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		S
2	If the organization received or held works of art, historical trea	asures, or other similar assets for finance	
_	-		○
	the following amounts required to be reported under SEAS 11	16 (ASC 958) relating to these items	
а	the following amounts required to be reported under SFAS 1. Revenue included on Form 990, Part VIII, line 1.	16 (ASC 958) relating to these items	▶ \$

Sche	chedule D (Form 990) 2017 JANUS YOUTH PROGRAMS, INC. 23-7345990 Page 2								
Par	t III Organizations Maintaining C	ollections of A	t, Historica	al Trea	sures, or Oth	<u>ier Simi</u>	<u>lar Asse</u>	ts (continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any c	f the foll	lowing that are a	significant	use of its	collection it	ems
	(check all that apply)								
а	Public exhibition	d	Loan c	r exchar	nge programs				
b	Scholarly research	е	Other_						
С	Preservation for future generations								
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 of	r receive donations	of art, historica	l treasur	es, or other simil	ar assets			
	to be sold to raise funds rather than to be maintained as part of the organization's collection?								
Par	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, Pa	rt X, line 21							
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contrib	outions o	or other assets no	t included	<u> </u>	_	
	on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table				,		
							ļ .	Amount	
С	Beginning balance					1c	<u> </u>		
d	Additions during the year					1d			
е	Distributions during the year					1e		_	
f	Ending balance					1f_			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow	or cust	odial account liat	ollity?		Yes	U No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planation has	been pro	ovided on Part X	II			
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes"	on Form	990, Part IV, line	10			
		(a) Current year	(b) Prior ye	ar (d	c) Two years back	(d) Three	years back	(e) Four ye	ars back
1a	Beginning of year balance	15,544,	15,	544.	15,539		15,534.		15,534 <u>.</u>
b	Contributions	50,000.							
С	Net investment earnings, gains, and losses	155.	·		5		5.		
d	Grants or scholarships	-"							
е	Other expenditures for facilities		-						
	and programs								
f	Administrative expenses					_			
g	End of year balance	65,699.	15	544.	15,544		15,539.		15,534.
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, colu	ımn (a)) h	neld as				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment ► 22.83	%							
С	Temporarily restricted endowment ▶7	7.17 %							
	The percentages on lines 2a, 2b, and 2c sho								
За	Are there endowment funds not in the posse	ession of the organiz	ation that are h	neld and	administered for	the organ	ization	_	
	by								es No
	(i) unrelated organizations							3a(i) 2	<u>x </u>
	(ii) related organizations							3a(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on Schedu	le R?				3b	
4	Describe in Part XIII the intended uses of the	e organization's endo	wment funds		<u> </u>				
Pai	t VI Land, Buildings, and Equipn	nent.							
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV, line	11a See	Form 990, Part	X, line 10			
	Description of property	(a) Cost or o	ther (b)	Cost or	other (c)	Accumula	ted	(d) Book v	/alue
		basis (investr	nent)	oasis (ot	her) d	epreciatio	n _		
1a	Land				,598.				<u>,598.</u>
	Buildings		4	,769	,537. 2	078,		2,690	
	Leasehold improvements			695	,664.	687,0			,578.
	Equipment			743	,487.	655,	798.	87	<u>,689.</u>
	Other								
	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, column (B),	line 10c	;)		>	3,504	,820.

Schedule D (Form 990) 2017 JANUS YOUTH	PROGRAMS,	INC.		-/345990 Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" ((a) Description of security or category (including name of security)	on Form 990, Part IV (b) Book value			l-of-year market value
(1) Financial derivatives	(b) Book value	(c) Metriod or	valuation Cost of Cite	Torycar market value
(2) Closely-held equity interests				
(3) Other			_	
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
_(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.		<u> </u>	- ·	
Complete if the organization answered "Yes" of	on Form 990, Part IV	, line 11c See Form 990,	Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of	valuation Cost or end	I-of-year market value
(1)	-			
(2)				
(3)				
(4)				
(5)	<u> </u>			
	<u> </u>		<u> </u>	
	<u> </u>			
(9)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			<u>.</u>	
Part IX Other Assets.				
Complete if the organization answered "Yes" of		, line 11d See Form 990,	, Part X, line 15	
	Description			(b) Book value
(2)				
(3)				
(4)				
(5)				
		_ 		
(7)				
(8)			 .	
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.	15)			
Complete if the organization answered "Yes" of	on Form 000 Bort IV	line 11e or 11f See For	m 990 Part Y June 25	
	JI FORII 990, FAIL IV	(b) Book value	11 990, Fait A, IIIle 25	·
1. (a) Description of liability (1) Federal income taxes		(0) 2001. (4.00	-	,
(2)			†	•
(3)			†	
(4)			1	
(5)			1	
(6)			1	
(7)	-		1	
(8)			1	•
(9)			1	
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)		1	
	/			

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

Sche	dule D (Form 990) 2017 JANUS YOUTH PROGRAMS, INC	Z	23-7345990 Page 4
Par	XI Reconciliation of Revenue per Audited Financial States	ments With Revenue per F	Return.
	· Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a	· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements		1 13,693,687.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments	2a 1,642.	4
b	Donated services and use of facilities	2b 79,898.	4
С	Recoveries of prior year grants	2c	4
d	Other (Describe in Part XIII)	2d	<u> </u>
е	Add lines 2a through 2d		2e 81,540.
3	Subtract line 2e from line 1		3 13,612,147.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c 0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	Mark Francisco	5 13,612,147.
Pai	t XII Reconciliation of Expenses per Audited Financial State		Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a	1. 112 062
1	Total expenses and losses per audited financial statements		1 13,112,963.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1 70 000	
a	Donated services and use of facilities	2a 79,898.	4
b	Prior year adjustments	2b	-
С	Other losses	2c	-]
d	Other (Describe in Part XIII)	_2d	70 000
е	Add lines 2a through 2d		2e 79,898.
3	Subtract line 2e from line 1		<u>3</u> 13,033,065.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4 1
b	Other (Describe in Part XIII)	4b	
	Add lines 4a and 4b		4c 0.
<u>5</u>	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5 13,033,065.
	t XIII Supplemental Information.		4 Ba 4 V Iva 0 Ba 4 VI
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P		4, Part X, line 2, Part XI,
111162	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any a	additional information	
			
PAF	T V, LINE 4:		
	1 1 1111 11		
THE	EARNINGS GENERATED BY THE DONOR RESTRIC	CTED ENDOWMENT FUN	ID ARE
RES	TRICTED TO THE INSIGHTS TEEN PARENT PROG	FRAMS. THE EARNING	S GENERATED BY
	•		
THE	BOARD DESIGNATED ENDOWMENT FUND ARE RES	STRICTED TO SCHOLA	ARSHIPS AWARDS.
	•		
			. <u></u> .
			

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Schedule D (Form 990) 2017

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Schedule G (Form 990 or 990-EZ) 2017

Internal Revenue Service Go to www.lrs.gov/Form990 for the latest instructions. Name of the organization Employer identification number 23-7345990 JANUS YOUTH PROGRAMS, INC Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser (v) Amount paid (vi) Amount paid (i) Name and address of individual (IV) Gross receipts to (or retained by) to (or retained by) (ii) Activity have custody or control of contributions? or entity (fundraiser) fundraiser from activity organization listed in col (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 v 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 GOLF DINNER IN (add col (a) through 3 TOURNAMENT THE VINES col (c)) (event type) (total number) (event type) 49,932 52,250. 15,879. 118,061. 1 Gross receipts 21,630. 3,976. 53,217. 27,611 2 Less Contributions 22,321 30,620. 11,903 64,844. Gross income (line 1 minus line 2) Cash prizes 1,526. 1,526. Noncash prizes Direct Expenses 350. 478. 6 Rent/facility costs 16,020. 16,848. 14,922. 16,564. 1,642. 7 Food and beverages 950 950. 8 Entertainment 1,802. 2,630 9 Other direct expenses 175 5,607. 10 Direct expense summary Add lines 4 through 9 in column (d) 41,495. 23,349. 11 Net income summary Subtract line 10 from line 3, column (d) 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 (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 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 b If "No," explain Yes 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain _

INC.

Schedule G (Form 990 or 990 EZ) 2017 JANUS YOUTH PROGRAMS,

732082 09-13-17

23-7345990 Page 2

Schedule G (Form 990 or 990-EZ) 2017

Sch	ledule G (Form 990 or 990-EZ) 2017 JANUS YOUTH PROGRAMS, INC.	<u>3-734599</u>	0 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	s 🔲 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	s 🔲 No
13	Indicate the percentage of gaming activity conducted in		
	The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records	100	
17	Taker the hame 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	s No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	į	
	of gaming revenue retained by the third party > \$,
c	If "Yes," enter name and address of the third party		,
	The same state and		
	Name		
	Address ►		
			·
16	Gaming manager information		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	s 🔲 No
ь	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t		
	organization's own exempt activities during the tax year > \$		
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part	Ill lines 9 9b	10b 15b
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	,,, .,,	,,,,,,,,
	<u></u>		

<u>Schedule</u>	G (Form 990 or 990-Ez	Z) JANUS YOUTH	PROGRAMS,	INC	<u> </u>	<u>7345990 Page 4</u>
Part IV	Supplemental	z) JANUS YOUTH Information (continued)				
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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OMB No 1545-0047	2017	

Open to Public Inspection

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Name of the organization JANUS YOU	JANUS YOUTH PROGRAMS	MS. INC.					Employer ic	Employer identification number
Part I General Information on Grants and Assistance	nd Assistance							0000
1 Does the organization maintain records to substantiate the amount of	to substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion	
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance? acedures for monit	oring the use of grant	funds in the United	States	•			X Yes No
12	Domestic Organi	zations and Domestic	Governments. C	omplete if the orga	Inization answered "Y	Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	: IV, line 21, 1	orany
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II can	be duplicated if additi	onal space is need	led				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(f)	(h) Purpose of grant or assistance
							,	
	ind government or	ganizations listed in the	e line 1 table				A .	
3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for For	s listed in the line	n table					Cohodi	lo I (Corm 000) (2017)
							OCHEON	Schedule I (Form 990) (2017)

(f) Description of noncash assistance POOD/CLOTHING (e) Method of valuation (book, FMV, appraisal, other) ASSISTANCE IS PROVIDED EXCLUSIVELY TO YOUTH ENROLLED IN THE ORGANIZATION'S THE ORGANIZATION PROVIDES PROGRAM SERVICES TO YOUTH LOCATED IN Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed 233, 438, FMV (d) Amount of non-cash assistance ö ö o Ö 27,874 877,869 102,439 (c) Amount of cash grant JANUS YOUTH PROGRAMS, INC. 1207 1710 3103 555 (b) Number of recipients (a) Type of grant or assistance OREGON AND WASHINGTON INCENTIVE/RECREATION/OTHER RENT/UTILITY ASSISTANCE PART I, LINE 2: PROGRAMS. TRANSPORTATION FOOD/CLOTHING EDUCATION Part III

Schedule I (Form 990) (2017)

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Page 2

23-7345990

Schedule I (Form 990) (2017)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

JANUS YOUTH PROGRAMS. INC.

Employer identification number 23-7345990

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee X Written employment contract Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization X a Receive a severance payment or change-of-control payment? 4a X 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? $\overline{\mathbf{x}}$ c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of X a The organization? 5a X 5b b Any related organization? If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of X a The organization? 6a X b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments 7 not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes." describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	E
(A) Name and Title		(i) Base compensation	(n) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)-(i)(g)	in column (B) reported as deferred on prior Form 990
(1) DENNIS L. MORROW	Θ	169,825.	0	0	3,331.	7,832.	180,988.	0
CUTIVE DIRECTOR	Ξ	4	0	0.	0	0.	0	0.
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SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990.

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

Name of the organization

Employer Identification number

23-7345990 JANUS YOUTH PROGRAMS, INC. Part I Types of Property (d) (a) (b) (c) Noncash contribution Method of determining Number of Check if contributions or amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g Art - Works of art Art · Historical treasures Art - Fractional interests 3 Books and publications 218,014.GOODWILL GUIDELINES X Clothing and household goods 5 Cars and other vehicles Boats and planes 7 Intellectual property 8 Securities - Publicly traded 9 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests 12 Securities · Miscellaneous Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 Collectibles 18 527 115,158.FAIR MARKET VALUE X Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other 26 Other Other 27 Other 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 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 X 30a exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

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

Schedule M (Form 990) 2017

Sched	ule M (Forn	n 99(0) 2017	JAN	JS Y	OUTH	I PRO	GRAMS,	INC.				23-734	15990	Page 2
Part	'II Sup	porti	mental	Inforr , colun	natio	n. Prov	ide the in	formation r	equired by	Part I, Imer of Item	ies 30b, 32b, as received, or	and 33, a comb	and whether	the organ	ızatıon
SCH	EDULE	м.	PART	Ι.	COI	UMN	(B):								
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SCHEDULE 0

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

JANUS YOUTH PROGRAMS, INC.

Employer identification number 23-7345990

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
JANUS YOUTH PROGRAMS HAS BEEN CHANGING LIVES AND BUILDING FUTURES FOR
CHILDREN, YOUTH, AND FAMILIES IN OREGON AND WASHINGTON SINCE 1972.
INNOVATIVE, COMMUNITY-BASED PROGRAMS INCLUDE THE NORTHWEST'S LARGEST
ARRAY OF RUNAWAY AND HOMELESS YOUTH SERVICES; HELP FOR YOUTH WHO HAVE
BEEN SEX TRAFFICKED; SERVICES FOR TEEN PARENTS AND THEIR CHILDREN;
RESIDENTIAL PROGRAMS; A COLLEGE SCHOLARSHIP PROGRAM THAT HELPS YOUTH
WHO HAVE BEEN SUCCESSFUL AT JANUS ATTEND COLLEGE OR COMPLETE A
VOCATIONAL TRAINING PROGRAM; AND COMMUNITY FOOD PROGRAMS IN AFFORDABLE
HOUSING COMMUNITIES.
SERVING OVER 6,000 INDIVIDUALS ANNUALLY, SHELTERING NEARLY 200 YOUTH
NIGHTLY, WORKING WITH 400 YOUTH DAILY, INITIATING THOUSANDS OF STREET
OUTREACH CONTACTS ANNUALLY WITH RUNAWAY AND HOMELESS YOUTH, JANUS IS
ONE OF THE LARGEST YOUTH-SERVING AGENCIES IN THE NORTHWEST.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
SHORT-TERM SHELTER, AND TRANSITIONAL AND INDEPENDENT LIVING OPTIONS
DESIGNED TO ASSIST HOMELESS YOUTH TO SUCCESSFULLY EXIT STREET LIFE.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
COMMMUNITY FOOD PROGRAM -THIS PROGRAM INCLUDES COMMUNITY ORGANIC
GARDENS, AN ORCHARD, AN ORGANIC EGG PROJECT, A COMMUNITY KITCHEN, A
MARKET GARDENER'S INITIATIVE, AND A COMMUNITY-RUN, HEALTHY GROCERY
STORE. BASED IN NORTH PORTLAND AFFORDABLE HOUSING NEIGHBORHOODS, THE
PROGRAM FOCUSES ON ELIMINATING HUNGER, PROVIDING EMPLOYMENT
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Employer identification number Name of the organization 23-7345990 JANUS YOUTH PROGRAMS, INC. OPPORTUNITIES FOR TEENAGERS AND ADULTS, DEVELOPING ENTREPRENEURIAL OPPORTUNITIES, SUPPORTING LEADERSHIP SKILL DEVELOPMENT AND DELIVERING HEALTH AND NUTRITION INFORMATION. EXPENSES \$ 723,822. INCLUDING GRANTS OF \$ 10,350. REVENUE \$ 213,700. FORM 990, PART VI, SECTION A, LINE 2: GREG BAUER (BOARD MEMBER) HAS A FAMILY RELATIONSHIP WITH MELISSA BAUER (BOARD MEMBER). FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA, AND REVIEWED BY THE EXECUTIVE DIRECTOR AND FISCAL DIRECTOR. A COPY IS PROVIDED TO THE FINANCE COMMITTEE PRIOR TO ITS FILING WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: UPON ACCEPTANCE TO THE BOARD, MEMBERS ARE GIVEN A CONFLICT OF INTEREST POLICY, AND REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICTS. THE POLICY IS DISCUSSED PERIODICALLY. POTENTIAL CONFLICTS ARE THEN MONITORED, AND WHEN VOTING ACTIONS OCCUR IN BOARD MEETINGS, ANY PERSON KNOWN TO HAVE A CONFLICT OF INTEREST IS EXCUSED FROM THE MEETING UNTIL THE DISCUSSION AND VOTE IS COMPLETED. SUCH EXCUSALS ARE DOCUMENTED IN THE MINUTES. FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES EXECUTIVE DIRECTOR AND OFFICER COMPENSATION AFTER CONDUCTING FORMAL PERFORMANCE

REVIEWS AND SURVEYING COMPENSATION LEVELS FOR EXECUTIVE DIRECTORS AND

OFFICERS OF OTHER 501(C)(3) ORGANIZATIONS IN THE STATE OF OREGON.

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization JANUS YOUTH PROGRAMS, INC.	Employer identification number 23-7345990
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.
	