For Paperwork Reduction Act Notice, see the separate instructions

2949305510001

Form

Department of the Treasury

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www irs gov/form990

2016 Open to Public Inspection

For the 2016 calendar year, or tax year beginning 10/01/16, and ending 09/30/17C Name of organization D Employer identification number Check if applicable Address change -YOUTH FARM AND MARKET PROJECT Doing business as YOUTH FARM 41-1896055 Name change Number and street (or P O box if mail is not delivered to street address) Initial return 128 W. 33RD ST RM/STE 2 612-872-4226 Final return/ City or town, state or province country, and ZIP or foreign postal code terminated MINNEAPOLIS MN 55408 862,576 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Application pending GUNNAR LIDEN H(b) Are all subordinates included? If 'No,' attach a list (see instructions X 501(c)(3) ◀ (insert no ) lax-exempt status 501(c) 4947(a)(1) or www.youthfarmmn.org Website > H(c) Group exemption number ▶ 1998 Form of organization X Corporation Trust Association Year of formation MN M State of legal domicile Part I Summary CANNED ADA 0 2 27.3 Activities & Governance 1 Briefly describe the organization's mission or most significant activities See Schedule O 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 8 4 Number of independent voting members of the governing body (Part V I line ₺ ECEIVED 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a 5 50 459 6 Total number of volunteers (estimate if necessary) 6 FEB 1 4 2018 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b Current Year OGDEN. W Prior Year 468 478 843,488 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2q) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,743 11,082 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 474,221 854,571 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 478,712 409,129 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 44,335 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 168,161 159,900 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 569,029 646,873 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 207,698 -94,808 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 56,185 303,506 20 Total assets (Part X, line 16) 126,936 87,313 21 Total liabilities (Part X, line 26) 176,570 -31,128 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign EXECUTIVE DIRECTOR Here GUNNAR LIDEN Type or print name and title Print/Type preparer's name Date PTIN Paid 01/30/18 self-employed P00969235 Roger D. Plath Preparer FAYETTE, MELSSEN & PLATH, 41-1503687 Firm's name Firm s EIN ▶ Use Only 6625 LYNDALE AVE 612-861-8366 MINNEAPOLIS, MN 55423-2378 Firm's address Phone no X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2016)



Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Х 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, X 5 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 Х "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х 8 complete Schedule D. Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or Х debt negotiation services? If "Yes," complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted Х 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Х 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If X 12b "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate X 14b foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other X 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Х 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

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19

If "Yes," complete Schedule G, Part III

## Part IV Checklist of Required Schedules (continued)

|                | - Treatment of required constanted (continued)   |          |              |              |
|----------------|--|----------|--------------|--------------|
| 200            | Did the assessment as a second | <u> </u> | Yes          | No           |
| zva<br>b       | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  | 20a      |              | X            |
| 21             | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20b      |              |              |
|                | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  |          |              | х            |
| 22             | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on  | 21       |              |              |
|                | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  | 22       |              | х            |
| 23             | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the  | 22       |              |              |
|                | organization's current and former officers, directors, trustees, key employees, and highest compensated  |          |              |              |
|                | employees? If "Yes," complete Schedule J   | 23       |              | Х            |
| 24a            | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than  | 23       |              |              |
|                | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b  |          |              |              |
|                | through 24d and complete Schedule K. If "No," go to line 25a   | 24a      |              | х            |
| b              | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b      |              |              |
| c              | Did the organization maintain an escrow account other than a refunding escrow at any time during the year  | 245      |              |              |
| Ū              | to defease any tax-exempt bonds?   | 24c      |              |              |
| d              | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  | 24d      |              |              |
|                | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit   | 240      |              |              |
|                | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a      |              | х            |
| b              | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior   | 234      |              |              |
| _              | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?   |          |              | l            |
|                | If "Yes," complete Schedule L, Part I  | 25b      |              | х            |
| 26             | 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, highest compensated employees, or  |          |              |              |
|                | disqualified persons? If "Yes," complete Schedule L, Part II   | 26       |              | Х            |
| 27             | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,   |          |              |              |
|                | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled  |          |              |              |
|                | entity or family member of any of these persons? If "Yes," complete Schedule L, Part III   | 27       |              | Х            |
| 28             | Was the organization a party to a business transaction with one of the following parties (see Schedule L,  |          |              |              |
|                | Part IV instructions for applicable filing thresholds, conditions, and exceptions)   |          |              |              |
| а              | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28a      |              | X            |
| b              | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete   |          |              |              |
|                | Schedule L, Part IV  | 28b      |              | Х            |
| С              | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)  |          |              | ĺ            |
|                | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV   | 28c      |              | Х            |
| 29             | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | 29_      |              | X            |
| 30             | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified   |          |              | ł            |
|                | conservation contributions? If "Yes," complete Schedule M  | 30       |              | X            |
| 31             | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,  |          |              |              |
|                | Part I   | 31       |              | X            |
| 32             | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"  |          |              |              |
|                | complete Schedule N, Part II   | 32_      |              | X            |
| 33             | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations   |          |              |              |
|                | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  | 33_      |              | X            |
| 34             | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,  |          |              | 1,,          |
|                | or IV, and Part V, line 1  | 34_      | ļ            | X            |
| 35a            | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a      |              | X            |
| b              | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a  |          |              |              |
|                | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  | 35b      |              | <del> </del> |
| 36             | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable   |          |              | v            |
| a <del>.</del> | related organization? If "Yes," complete Schedule R, Part V, line 2  | 36       | <del> </del> | X            |
| 37             | Did the organization conduct more than 5% of its activities through an entity that is not a related organization   |          |              |              |
|                | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,   |          |              | x            |
| 38             | Part VI  | 37       |              | -A           |
| J0             | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and   | 38       | X            |              |
|                | 19? Note. All Form 990 filers are required to complete Schedule O  |          | 1 42         | L            |

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 17 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Х 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 50 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х Did the organization have unrelated business gross income of \$1,000 or more during the year? За If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O h 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Х organization solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Х and services provided to the payor? 7a Х If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х required to file Form 8282? 7c If "Yes," indicate the number of Forms 8282 filed during the year 7e е Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c X Did the organization receive any payments for indoor tanning services during the tax year? 14a 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b b

MN 55408

612-872-4226

GUNNAR LIDEN

MINNEAPOLIS

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financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records >

128 W. 33RD ST - #2

| 1 7 | _ 1 | 0 | $\sim$ | <br>٦. |  |
|-----|-----|---|--------|--------|--|
|     |     |   |        |        |  |

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

| (A)<br>Name and Title |   |                                   | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) |              |              |                              | n<br>:) | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |  |
|-----------------------|---|-----------------------------------|--|--------------|--------------|------------------------------|---------|---|--|---|--|
|                       | related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional trustee  | Officer      | Key employee | Highest compensated employee | Former  | (W-2/1099-MISC)                                   | (,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                                | organization<br>and related<br>organizations        |  |
| (1) JOHN HUTCHINS     |   |                                   |  |              |              |                              | 1       |   |  |   |  |
|                       | 1.00  |                                   |  |              |              |                              |         |   |  |   |  |
| CHAIR                 | 0.00  | X                                 |  | X            |              |                              |         | 0   | 0  | 0   |  |
| (2) PATTI HAGUE       |   |                                   |  |              |              |                              |         |   |  |   |  |
|                       | 1.00  |                                   |  |              |              |                              |         |   |  | _   |  |
| TREASURER             | 0.00  | X                                 |  | X            |              |                              | _ _     | 0   | 0  | 0   |  |
| (3) ALEX ROBERTS      |   |                                   |  |              |              |                              |         |   |  |   |  |
| İ                     | 1.00  |                                   |  |              |              | 1                            | -       |   |  |   |  |
| SECRETARY             | 0.00  | X                                 | ļ  | X            |              | 11                           |         | 0   | 0  | 0   |  |
| (4) GENEVIEVE SALDIE  |   |                                   |  |              |              |                              | Ì       |   |  |   |  |
|                       | 1.00  |                                   |  |              |              |                              |         | _   |  |   |  |
| DIRECTOR              | 0.00  | X                                 |  |              | ļ            | 1                            |         | 0   | 0  | 0   |  |
| (5) VALERIA LA ROSA   |   |                                   |  |              | 1            |                              |         |   |  |   |  |
|                       | 1.00  |                                   |  |              |              |                              |         |   | •  | _   |  |
| DIRECTOR              | 0.00  | X                                 |  |              | <u> </u>     | 4                            | _       | 0   | 0  |   |  |
| (6) SHANNA WOODS      |   |                                   |  |              |              |                              |         |   |  |   |  |
|                       | 1.00  | l                                 |  |              | ļ            |                              |         |   | 0  | ,   |  |
| DIRECTOR              | 0.00  | X                                 |  | _            | <u> </u>     | 1                            |         | 0   | 0  | C   |  |
| (7) ALEX LANGE        |   |                                   |  |              |              |                              |         |   |  |   |  |
|                       | 1.00  |                                   |  |              |              |                              | Ì       |   | 0  |   |  |
| DIRECTOR              | 0.00  | X                                 | -  | _            | ļ            | <b>├</b> ─├                  | _       | 0   | 0  |   |  |
| (8) KENNETH EDWARDS   | 1 22  |                                   |  |              |              |                              |         |   |  |   |  |
| DIDECTOR              | 1.00  | ٦,                                |  |              |              |                              |         | _ \   | 0  | C   |  |
| DIRECTOR              | 0.00  | X                                 | <del> </del>   | <del> </del> | <del> </del> | +                            |         | 0   | U  |   |  |
| (9) GUNNAR LIDEN      | 40.00   |                                   | 1  |              |              |                              |         |   |  |   |  |
| EXECUTIVE DIRECTOR    | 0.00  |                                   |  | x            |              |                              |         | 66,199  | 0  | 2,806   |  |
|                       | 0.00  | +-                                | -  | ^            | +            | 1                            |         | 00,100  |  | =,300   |  |
| (10)                  |   |                                   |  |              |              |                              |         |   |  |   |  |
| (11)                  |   | -                                 |  |              |              | -                            | +       |   |  |   |  |
|                       |   |                                   |  |              |              |                              |         |   |  |   |  |

| <u>Pa</u>    | rt VII Section A. Officer  | s, Directors, Tru  | stee                              | s, K                  | ey E                   | mpl          | oyee                            | es, a            | and Highest Compensated                               | Employees (continued)                                      |  |
|--------------|--|--|-----------------------------------|-----------------------|------------------------|--------------|---------------------------------|------------------|---|--|--|
|              | (A) Name and title   | (B) Average hours per week (list any                           | bo                                | x, unle               | Pos<br>check<br>ess pe | erson        | than o                          | an               | (D) Reportable compensation from the                  | (E) Reportable compensation from related organizations     | (F) Estimated amount of other compensation               |
|              |  | hours for<br>related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional trustee | Officer                | Key employee | Highest compensated<br>employee | Former           | organization<br>(W-2/1099-MISC)                       | (W-2/1099-MISC)  | from the<br>organization<br>and related<br>organizations |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 | ļ                |   |  |  |
| 1b<br>c<br>d | Sub-total  Total from continuation she  Total (add lines 1b and 1c)    | ets to Part VII,   | Sect                              | ion A                 | <b>\</b>               |              | <b>-</b>                        | <b>&gt; &gt;</b> | 66,199  |  | 2,806  |
| 2            | Total number of individuals (ii  |  |                                   |                       | thos                   | se lis       | sted a                          | bov              |   | \$100,000 of   |  |
| 3            | Did the organization list any fi<br>employee on line 1a? If "Yes,      | ormer officer, dir   | ecto                              | r, or                 |                        |              |                                 |                  | oloyee, or highest compensa                           | ated   | Yes No   |
| 4            | For any individual listed on lir organization and related organization | e 1a, is the sum   | of re                             | port                  | able                   | con          | npens                           | satio            | on and other compensation complete Schedule J for sur | from the<br>ch   | 4 X  |
| 5            | Did any person listed on line for services rendered to the o           |  |                                   |                       |                        |              |                                 |                  |   | ındıvıdual   | 5 X  |
| Sect<br>1    | con B. Independent Contract<br>Complete this table for your f          |  | 0.000                             | stod :                | ndo                    | 2000         | dont (                          | conf             | tractors that recoved more                            | than \$100 000 of  |  |
| <u>.</u>     | compensation from the organ  | ization Report c   | omp                               | ensa                  | tion                   | fort         | he c                            | alen             | idar year ending with or with                         | nin the organization's tax yea<br>(B)<br>stion of services | (C)<br>Compensation                                      |
|              | Name and   | (A)<br>d business address                                      | •                                 | _                     |                        |              |                                 |                  | Descrip   | tion of services   | Compensation   |
|              |  |  |                                   |                       |                        |              |                                 |                  | <del></del>   |  |  |
|              |  | . <u> </u>   |                                   |                       |                        |              |                                 |                  |   |  |  |
|              |  |  |                                   |                       |                        |              |                                 |                  |   |  |  |
|              | Total number of independent  |  |                                   |                       |                        |              |                                 |                  |   | 0  |  |
| DAA          | received more than \$100,000   | ror compensation   | 1110                              | in the                | e org                  | janiz        | zatioi                          |                  | <del></del>   | U  | Form <b>990</b> (2016)                                   |

Part VIII

Statement of Revenue
Check if Schedule O contains a response or note to any line in this Part VIII

|  |         | Check if Schedule  | O contains      | a response or | note to any line i                    | in this Part VIII                      |   |  |
|--|---------|--|-----------------|---------------|---------------------------------------|--|---|--|
|  |         |  |                 | ·             | (A)<br>Total revenue                  | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512-514 |
| nts<br>nts   | 1a      | Federated campaigns                                      | 1a              |               |                                       |  |   |  |
| ìrai<br>our  | þ       | Membership dues  | 1b              |               |                                       |  |   |  |
| s, G   | С       | Fundraising events                                       | 1c              | 29,155        |                                       |  |   |  |
| Sift<br>ar   | d       | Related organizations                                    | 1d              |               |                                       |  |   |  |
| s, C   | е       | Government grants (contributions)                        | 1e              | 79,788        |                                       |  |   |  |
| P S  | f       | All other contributions, gifts, grants,                  |                 |               |                                       |  |   |  |
| hei  |         | and similar amounts not included above                   | 1f              | 734,545       |                                       |  |   |  |
| <u> </u>   | g       | Noncash contributions included in lines 1a               | •               |               |                                       |  |   |  |
| Cor  | h       | Total. Add lines 1a-1f                                   | " •             | •             | 843,488                               |  |   |  |
| Program Service Revenue Contributions, Gifts, Grants and Other Similar Amounts |         |  |                 | Busn Code     |                                       |  |   | 1  |
| ven  | 2a      |  |                 |               |                                       |  |   |  |
| Re   | b       |  |                 |               |                                       |  |   |  |
| vice   | С       |  |                 |               |                                       |  |   |  |
| Ser  | d       |  |                 |               |                                       |  |   |  |
| аш   | е       |  |                 |               |                                       |  |   |  |
| ogr  | f       | All other program service reve                           | nue             |               |                                       |  |   |  |
| P.   |         | Total. Add lines 2a-2f                                   |                 | <b>&gt;</b>   |                                       | ····                                   |   |  |
|  | 3       | Investment income (including                             | dividends, inte | erest,        |                                       |  |   | _  |
|  |         | and other similar amounts)                               |                 | ▶ _           | 1                                     |  |   | 1  |
|  | 4       | Income from investment of tax                            | c-exempt bond   | I proceeds ►  |                                       |  |   |  |
|  | 5       | Royalties  |                 | <b>&gt;</b>   |                                       |  |   |  |
|  |         | (ı) Real   | (1              | ii) Personal  |                                       |  |   |  |
|  | 6a      | Gross rents  |                 |               |                                       |  |   |  |
|  | b       | Less rental exps   |                 |               |                                       |  |   |  |
|  | С       | Rental inc or (loss)                                     |                 |               |                                       |  |   |  |
|  | d<br>7a | Net rental income or (loss) Gross amount from            |                 | <u> </u>      |                                       |  |   |  |
|  | ,       | sales of assets (i) Securities                           | ·               | (II) Other    |                                       |  |   |  |
|  |         | other than inventory                                     | <del>-  </del>  |               |                                       |  |   |  |
|  | ь       | Less cost or other                                       |                 |               |                                       |  |   |  |
|  |         | basis & sales exps                                       |                 |               |                                       |  |   |  |
|  |         | Gain or (loss)   |                 |               |                                       | i                                      | :                                       |  |
|  | d       | Net gain or (loss)                                       | unto [          |               | · · · · · · · · · · · · · · · · · · · |  | ······································  |  |
| ne   | oa      | Gross income from fundraising ever (not including \$ 29, | 1               |               |                                       |  |   |  |
| Other Revenue  |         | of contributions reported on line 1c                     | í               |               |                                       |  |   |  |
| Re   |         | See Part IV, line 18                                     |                 | 16,077        |                                       |  |   |  |
| her  | h       | Less direct expenses                                     | а<br>b          | 8,005         |                                       |  |   |  |
| ŏ  |         | Net income or (loss) from fund                           |                 |               | 8,072                                 |  |   |  |
|  |         | Gross income from gaming activities                      |                 | -             |                                       |  |   | ***************************************              |
|  | Ja      | See Part IV, line 19                                     | a               |               |                                       |  |   |  |
|  | h       | Less direct expenses                                     | b               |               |                                       |  |   |  |
|  |         | Net income or (loss) from gam                            |                 | <b>&gt;</b>   |                                       |  |   |  |
|  |         | Gross sales of inventory, less                           |                 |               |                                       |  | ••••••••••••••••••••••••••••••••••••••  |  |
|  |         | returns and allowances                                   | a               | l             |                                       |  |   |  |
|  | ь       | Less cost of goods sold                                  | b               |               |                                       |  |   |  |
|  |         | Net income or (loss) from sale                           | es of inventory | <b>•</b>      |                                       |  |   |  |
|  |         | Miscellaneous Revenue                                    | -               | Busn Code     |                                       |  |   |  |
|  | 11a     | REIMBURSED PROGRAM CO                                    | OSTS            | 611600        | 1,552                                 | 1,552                                  |   |  |
|  | b       | MISCELLANEOUS  |                 | 611600        | 1,458                                 | 1,458                                  |   |  |
|  | С       |  |                 |               |                                       |  |   |  |
|  | d       | All other revenue  |                 |               |                                       |  |   |  |
|  | е       | Total Add lines 11a-11d                                  |                 | ▶ _           | 3,010                                 |  |   |  |
|  | 12      | Total revenue See instructio                             | ns              | <b>&gt;</b>   | 854,571                               | 3,010                                  | 0                                       | 1  |

| P        | n 990 (2016), YOUTH FARM AND MA  |                       | 41-189                       |                                     | Page <b>10</b>                 |
|----------|--|-----------------------|------------------------------|-------------------------------------|--------------------------------|
| Sec      | tion 501(c)(3) and 501(c)(4) organizations must co   |                       |                              | lete column (A)                     |                                |
|          | Check if Schedule O contains a respo   | ·                     |                              |                                     |                                |
|          | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses | (B) Program service expenses | (C) Management and general expenses | (D)<br>Fundraising<br>expenses |
| 1        | Grants and other assistance to domestic organizations  |                       |                              |                                     |                                |
|          | 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  | 70,390                | 17,598                       | 28,156                              | 24,636                         |
| 6        | Compensation not included above, to disqualified   |                       | Ì                            |                                     |                                |
|          | persons (as defined under section 4958(f)(1)) and  |                       |                              |                                     |                                |
| -        | persons described in section 4958(c)(3)(B)   | 359,784               | 305,367                      | 46,847                              | 7,570                          |
| 7<br>8   | Other salaries and wages   | 339,104               | 303,367                      | 40,047                              | 7,370                          |
| 0        | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)                                   |                       |                              |                                     |                                |
| 9        | Other employee benefits  | 14,253                | 3,866                        | 8,986                               | 1,401                          |
| 10       | Payroll taxes  | 34,285                | 25,548                       | 6,624                               | 2,113                          |
| 11       | Fees for services (non-employees)  |                       |                              |                                     |                                |
| а        |  |                       |                              |                                     |                                |
| b        | Legal  |                       |                              |                                     |                                |
| С        | Accounting   | 11,460                | 3,430                        | 7,826                               | 204                            |
| d        | Lobbying   |                       |                              |                                     |                                |
| е        | Professional fundraising services See Part IV, line 17   |                       |                              |                                     |                                |
| f        | Investment management fees   |                       |                              |                                     |                                |
| g        | Other (If line 11g amount exceeds 10% of line 25, column   |                       |                              |                                     | 0.0                            |
|          | (A) amount, list line 11g expenses on Schedule O)  | 17,229                | 17,124                       | 77                                  | 28                             |
| 12       | Advertising and promotion  | 1,762                 | 336                          | 69                                  | 1,357<br>5,003                 |
| 13       | Office expenses  | 34,136                | 18,847                       | 10,286                              | 3,003                          |
| 14       | Information technology   |                       |                              |                                     |                                |
| 15<br>16 | Royalties<br>Occupancy   | 15,964                | 13,027                       | 1,791                               | 1,146                          |
| 17       | Travel   | 13,704                | 13,027                       | 1,751                               |                                |
| 18       | Payments of travel or entertainment expenses   |                       |                              |                                     | ·                              |
|          | for any federal, state, or local public officials  |                       |                              |                                     |                                |
| 19       | Conferences, conventions, and meetings   |                       |                              |                                     |                                |
| 20       | Interest   | 4,799                 |                              | 4,799                               |                                |
| 21       | Payments to affiliates   |                       |                              |                                     |                                |
| 22       | Depreciation, depletion, and amortization  | 4,388                 | 4,121                        | 267                                 |                                |
| 23       | Insurance  | 16,401                | 13,188                       | 2,626                               | 587                            |
| 24       | Other expenses Itemize expenses not covered  |                       |                              |                                     |                                |
|          | above (List miscellaneous expenses in line 24e If  |                       |                              |                                     |                                |
|          | line 24e amount exceeds 10% of line 25, column   |                       |                              |                                     |                                |
|          | (A) amount, list line 24e expenses on Schedule O)  | 45 404                | 45 062                       | 241                                 | ····                           |
| a        | <del> </del>   | 45,404                | 45,063                       | 341                                 | 63                             |
| b        | VEHICLE DEOFESSIONAL DEVELOPMENT   | 11,260                | 10,956<br>4,610              | 241<br>521                          | 227                            |
| c<br>C   | PROFESSIONAL DEVELOPMENT   | 5,358                 | 4,010                        | 721                                 |                                |
| d        |  |                       |                              |                                     |                                |
| e<br>25  | · · · · · · · · · · · · · · · · · · ·  | 646,873               | 483,081                      | 119,457                             | 44,335                         |
| 26       | Joint costs. Complete this line only if the  |                       | 202,002                      |                                     |                                |
| -        | organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if |                       |                              |                                     |                                |
|          | following SOP 98-2 (ASC 958-720)   |                       |                              |                                     | Form <b>990</b> (2016)         |

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 135,988 13,332 1 Cash-non-interest bearing 4,190 1,186 2 Savings and temporary cash investments 15,000 145,288 3 Pledges and grants receivable, net Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 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 6 organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 4,239 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 141,351 other basis Complete Part VI of Schedule D 10a 9,828 5,440 135,911 10b 10c b Less accumulated depreciation 11 11 Investments-publicly traded securities 12 Investments-other securities See Part IV, line 11 12 13 Investments-program-related See Part IV line 11 13 14 14 Intangible assets 12,600 12,600 15 15 Other assets See Part IV, line 11 56,185 303,506 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 35,190 30,356 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 91,746 56,957 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 87,313 126,936 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34 34,924 -77,541 Unrestricted net assets 141,646 46,413 28 Temporarily restricted net assets 28 Assets or Fund Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Net Retained earnings, endowment, accumulated income, or other funds 32 176,570 -31,128 33 Total net assets or fund balances 303,506 56,185 Total liabilities and net assets/fund balances

| -0111 | 1990 (2016) TOUTH FARM AND MARKET PROJECT 41-1896055  |    |     | Pag | ge 12      |
|-------|---|----|-----|-----|------------|
| Pa    | 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  | 8.  | 54, | <u>571</u> |
| 2     | Total expenses (must equal Part IX, column (A), line 25)  | 2  | 64  | 16, | <u>873</u> |
| 3     | Revenue less expenses Subtract line 2 from line 1   | 3  | 20  | 07, | 698        |
| 4     | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                     | 4  | - ; | 31, | 128        |
| 5     | Net unrealized gains (losses) on investments  | 5  |     |     |            |
| 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  |     |     |            |
| 10    | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line                |    |     |     |            |
|       | 33, column (B))   | 10 | 1'  | 76, | 570        |
| Pa    | rt XII Financial Statements and Reporting   |    |     |     | ,          |
|       | Check if Schedule O contains a response or note to any line in this Part XII                                  |    |     |     |            |
|       |   | •  |     | Yes | No         |
| 1     | Accounting method used to prepare the Form 990 Cash X Accrual Other   |    |     |     |            |
|       | If the organization changed its method of accounting from a prior year or checked "Other," explain in         |    |     |     |            |
|       | Schedule O  |    |     |     |            |
| 2a    | Were the organization's financial statements compiled or reviewed by an independent accountant?               |    | 2a  |     | X          |
|       | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or        |    |     |     |            |
|       | reviewed on a separate basis, consolidated basis, or both   |    |     |     |            |
|       | Separate basis Consolidated basis Both consolidated and separate basis  |    |     |     |            |
| b     | Were the organization's financial statements audited by an independent accountant?                            |    | 2b  | X   |            |
|       | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a       |    |     |     |            |
|       | separate basis, consolidated basis, or both   |    |     |     |            |
|       | X Separate basis Consolidated basis Both consolidated and separate basis                                      |    |     |     |            |
| С     | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight   |    |     |     |            |
|       | of the audit, review, or compilation of its financial statements and selection of an independent accountant?  |    | 2c  | X_  | Ĺ          |
|       | If the organization changed either its oversight process or selection process during the tax year, explain in |    |     |     |            |
|       | Schedule O  |    |     |     |            |
| 3a    | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in   |    |     |     |            |
|       | the Single Audit Act and OMB Circular A-133?  |    | 3a  |     | X          |
| b     | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the  |    |     |     |            |
|       | required audit or audits, explain why in Schedule O and describe any stens taken to undergo such audits       |    | 3b  |     |            |

Form **990** (2016)

# SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Name of the organization

YOUTH FARM AND MARKET PROJECT

Employer identification number

|         |                  | IOUIN FARM A  | MD MARKET PROOF  | CI            |              | 41-109                            | 6033               |  |  |  |  |  |  |
|---------|------------------|---|--|---------------|--------------|-----------------------------------|--------------------|--|--|--|--|--|--|
| Pari    | l Reas           | son for Public Charity  | Status (All organizations  | must co       | mplete       | this part ) See instruction       | ns                 |  |  |  |  |  |  |
| The org | ganization is no | t a private foundation becaus   | e it is (For lines 1 through 12, c                                     | heck only     | one box      | )                                 |                    |  |  |  |  |  |  |
| 1       | A church, co     | onvention of churches, or ass   | ociation of churches described i                                       | n section     | 170(b)(1     | ()(A)(ı).                         | $\neg$             |  |  |  |  |  |  |
| 2       | A school de:     | scribed in section 170(b)(1)(   | A)(iı). (Attach Schedule E (Form                                       | n 990 or 9    | 90-EZ))      | تمر ا                             |                    |  |  |  |  |  |  |
| 3       | A hospital oi    | r a cooperative hospital servi  | ce organization described in sec                                       | ction 170     | b)(1)(A)(    | ıiı).                             | 1                  |  |  |  |  |  |  |
| 4       | A medical re     | esearch organization operated   | d in conjunction with a hospital of                                    | described     | ın sectio    | n 170(b)(1)(A)(iii). Enter the he | ospital's name,    |  |  |  |  |  |  |
|         | city, and sta    |   |  |               |              |                                   |                    |  |  |  |  |  |  |
| 5       | An organizat     | tion operated for the benefit of  | of a college or university owned                                       | or operate    | ed by a go   | overnmental unit described in     |                    |  |  |  |  |  |  |
|         |                  | (b)(1)(A)(iv). (Complete Part   | - · · · · · · · · · · · · · · · · · · ·                                | •             | , ,          |                                   |                    |  |  |  |  |  |  |
| 6       |                  | A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  |  |               |              |                                   |                    |  |  |  |  |  |  |
| 7 2     | An organizat     | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) |  |               |              |                                   |                    |  |  |  |  |  |  |
| 8       | <del>-</del> ,   | A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)   |  |               |              |                                   |                    |  |  |  |  |  |  |
| 9       | -i               |   | cribed in section 170(b)(1)(A)(i                                       |               | ed in coni   | unction with a land-grant collec  | ne                 |  |  |  |  |  |  |
| • L     |                  |   | of agriculture (see instructions)                                      |               |              |                                   | ,-                 |  |  |  |  |  |  |
| 10      | An organizat     | tion that normally receives (1  | l) more than 33 1/3% of its supp                                       | ort from o    | contribution | ons, membership fees, and gro     | oss                |  |  |  |  |  |  |
|         |                  |   | pt functions—subject to certain  |               |              |                                   |                    |  |  |  |  |  |  |
|         |                  | •   | nd unrelated business taxable in                                       |               |              | •                                 |                    |  |  |  |  |  |  |
|         | <del>-</del> 1   |   | 0, 1975 See section 509(a)(2).   |               |              |                                   |                    |  |  |  |  |  |  |
| 11      | e4 -             | •   | exclusively to test for public safe                                    | -             |              |                                   |                    |  |  |  |  |  |  |
| 12      | _]               | ,   | exclusively for the benefit of, to                                     |               |              | •                                 |                    |  |  |  |  |  |  |
|         |                  | · · · · · · · · · · · · · · · · · · ·   | cations described in section 509<br>nat describes the type of suppor   |               |              |                                   |                    |  |  |  |  |  |  |
| a       | ,,               | •   | erated, supervised, or controlled                                      |               |              |                                   |                    |  |  |  |  |  |  |
| u       |                  |   | ver to regularly appoint or elect :                                    |               |              |                                   | .9                 |  |  |  |  |  |  |
|         |                  |   | omplete Part IV, Sections A ai   |               |              |                                   |                    |  |  |  |  |  |  |
| b       | Type II.         | A supporting organization su  | pervised or controlled in connec                                       | tion with     | ts suppo     | rted organization(s), by having   |                    |  |  |  |  |  |  |
|         | control o        | r management of the suppor  | ting organization vested in the s                                      | ame pers      | ons that     | control or manage the supporte    | ∍d                 |  |  |  |  |  |  |
|         | .—,              | tion(s) You must complete   | ·  |               |              |                                   |                    |  |  |  |  |  |  |
| С       |                  |   | upporting organization operated tructions) You must complete           |               |              |                                   | ith,               |  |  |  |  |  |  |
| d       | 1                |   | A supporting organization ope  |               |              |                                   |                    |  |  |  |  |  |  |
|         |                  | • •   | e organization generally must sa                                       | •             |              |                                   | ess                |  |  |  |  |  |  |
| _       | <u> </u>         | · ·   | nust complete Part IV, Section   |               |              |                                   |                    |  |  |  |  |  |  |
| е       |                  |   | eived a written determination fro<br>n-functionally integrated support |               |              | за турет, туре п, туре п          |                    |  |  |  |  |  |  |
| f       |                  | mber of supported organizati  |  |               |              |                                   |                    |  |  |  |  |  |  |
| g       |                  | following information about th  |  |               |              |                                   |                    |  |  |  |  |  |  |
| (ı) Na  | ame of supported | (II) EIN  | (III) Type of organization   | (iv) is the c | rganization  | (v) Amount of monetary            | (vi) Amount of     |  |  |  |  |  |  |
|         | organization     |   | (described on lines 1–10   | , .           | r governing  | support (see                      | other support (see |  |  |  |  |  |  |
|         |                  |   | above (see instructions))  | docui         |              | instructions)                     | instructions)      |  |  |  |  |  |  |
|         |                  | ļ   |  | Yes           | No           |                                   |                    |  |  |  |  |  |  |
| (A)     |                  |   |  |               |              |                                   |                    |  |  |  |  |  |  |
| (D)     |                  |   |  | -             |              |                                   |                    |  |  |  |  |  |  |
| (B)     |                  |   |  |               |              | ,                                 |                    |  |  |  |  |  |  |
| (C)     |                  |   |  |               |              |                                   | <del></del>        |  |  |  |  |  |  |
|         |                  |   |  |               |              |                                   |                    |  |  |  |  |  |  |
| (D)     |                  |   |  |               |              |                                   |                    |  |  |  |  |  |  |
| (E)     |                  |   |  |               |              |                                   |                    |  |  |  |  |  |  |
|         | <del></del>      |   |  |               |              |                                   |                    |  |  |  |  |  |  |
| Total   |                  |   |  |               |              |                                   |                    |  |  |  |  |  |  |

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

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

| Sec      | tion A. Public Support   |                       |                      |                        |                       |             |             |
|----------|--|-----------------------|----------------------|------------------------|-----------------------|-------------|-------------|
| Caler    | ndar year (or fiscal year beginning in)  | (a) 2012              | (b) 2013             | (c) 2014               | (d) 2015              | (e) 2016    | (f) Total   |
| 1        | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")   | 577,652               | 726,709              | 566,690                | 468,478               | 843,488     | 3,183,017   |
| 2        | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  | ·                     |                      |                        |                       |             |             |
| 3        | The value of services or facilities furnished by a governmental unit to the organization without charge  |                       | 60,780               | 66,780                 | 66,780                | 66,780      | 261,120     |
| 4        | Total. Add lines 1 through 3   | 577,652               | 787,489              | 633,470                | 535,258               | 910,268     | 3,444,137   |
| 5        | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount |                       |                      |                        |                       | :           | 633,669     |
|          | shown on line 11, column (f)   |                       |                      |                        |                       | ·····       | 2,810,468   |
| 6<br>Sec | Public support. Subtract line 5 from line 4 tion B. Total Support  | <u> </u>              |                      |                        |                       |             | 2,010,100   |
|          | ndar year (or fiscal year beginning in)  | (a) 2012              | (b) 2013             | (c) 2014               | (d) 2015              | (e) 2016    | (f) Total   |
| 7        | Amounts from line 4  | 577,652               | 787,489              | 633,470                | 535,258               | 910,268     | 3,444,137   |
| 8        | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 10                    | 7                    | 3                      |                       | 1           | 21          |
| 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)  |                       |                      |                        |                       |             |             |
| 11       | Total support. Add lines 7 through 10  |                       |                      |                        |                       |             | 3,444,158   |
| 12       | Gross receipts from related activities, etc  |                       |                      |                        |                       | 12          | 19,087      |
| 13       | First five years. If the Form 990 is for the   | organization's first  | , second, third, for | urth, or fifth tax yea | r as a section 501    | (c)(3)      | _ []        |
|          | organization, check this box and stop her  |                       |                      |                        |                       |             | <u> </u>    |
| Sec      | tion C. Computation of Public Su   |                       |                      |                        | <del> </del>          | 44          | 81.60%      |
| 14       | Public support percentage for 2016 (line 6   |                       |                      | ın (f))                |                       | 14          | 81.83 %     |
| 15       | Public support percentage from 2015 Sch  |                       |                      | 40 and line 44 is 3    | 22 1/20/ or more o    |             | 81.8370     |
| 16a      | 33 1/3% support test—2016 If the organ   |                       |                      |                        | 55 1/5% OF ITIONE, C  | HECK IIIIS  | <b>▶</b> [X |
|          | box and stop here The organization qual 33 1/3% support test—2015. If the organ  |                       |                      |                        | 5 is 33 1/3% or mo    | ore check   | 1           |
| b        | this box and stop here. The organization   |                       |                      |                        | 3 13 33 173 70 OF TIM | ore, encore | ▶ [         |
| 170      | 10%-facts-and-circumstances test—20  |                       |                      |                        | Sa. or 16b. and line  | 14 is       | <u> </u>    |
| 110      | 10% or more, and if the organization mee   |                       |                      |                        |                       |             |             |
|          | Part VI how the organization meets the "fi   |                       |                      |                        |                       |             |             |
|          | organization   |                       |                      | ,                      |                       |             | ▶ [         |
| b        | 10%-facts-and-circumstances test—20  | 15. If the organizati | on did not check a   | a box on line 13, 16   | Sa, 16b, or 17a, an   | d line      |             |
| ~        | 15 is 10% or more, and if the organization   |                       |                      |                        |                       |             |             |
|          | Explain in Part VI how the organization m  |                       |                      |                        |                       | ublicly     | . —         |
|          | supported organization   |                       |                      | -                      |                       |             | <b>&gt;</b> |
| 18       | Private foundation. If the organization di   | d not check a box     | on line 13, 16a, 16  | b, 17a, or 17b, che    | eck this box and se   | ee          |             |
|          | instructions   |                       |                      |                        |                       |             | <u> </u>    |

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

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

| Sec | tion A. Public Support   | quamy arraor a      |                     | ocion, piodes o                                  | 0111p1010 7 21111     | · /          |             |
|-----|--|---------------------|---------------------|--|-----------------------|--------------|-------------|
|     | ndar year (or fiscal year beginning in)  | (a) 2012            | (b) 2013            | (c) 2014   | (d) 2015              | (e) 2016     | (f) Total   |
| 1   | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   | <del></del>         |                     | <u> </u>   |                       |              |             |
| 2   | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |                     |                     |  |                       |              |             |
| 3   | Gross receipts from activities that are not an unrelated trade or business under section 513   |                     |                     |  |                       |              |             |
| 4   | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |                     |                     |  |                       |              |             |
| 5   | The value of services or facilities furnished by a governmental unit to the organization without charge  |                     |                     |  | ,                     |              |             |
| 6   | Total. Add lines 1 through 5   |                     |                     |  |                       |              |             |
| 7a  | Amounts included on lines 1, 2, and 3 received from disqualified persons   |                     |                     |  |                       |              |             |
| b   | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year           |                     |                     |  |                       |              |             |
| С   | Add lines 7a and 7b  |                     |                     |  |                       |              | <del></del> |
| 8   | Public support (Subtract line 7c from  |                     | ļ                   |  |                       |              |             |
| 500 | line 6)  |                     | <u> </u>            |  |                       | L            | L           |
|     | tion B. Total Support  ndar year (or fiscal year beginning in)   | (-) 2012            | (1) 2042            | (c) 2014   | / <sub>4</sub> ) 2015 | (2) 2013     | (f) Total   |
| 9   | Amounts from line 6  | (a) 2012            | (b) 2013            | (c) 2014   | (d) 2015              | (e) 2013     | (1) 10(a)   |
|     |  |                     | <del></del>         | <del>                                     </del> |                       | <del> </del> | +           |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources  |                     | ,                   |  |                       |              |             |
| b   | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  |                     |                     |  |                       |              |             |
| c   | Add lines 10a and 10b  |                     | ļ                   |  |                       |              |             |
| 11  | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  |                     | <i>f</i>            |  |                       |              |             |
| 12  | Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  |                     |                     |  |                       |              |             |
| 13  | Total support. (Add lines 9, 10c, 11, and 12)  |                     |                     |  |                       |              |             |
| 14  | First five years If the Form 990 is for the  | organization's firs | t, second third for | ourth, or fifth tax ve                           | ar as a section 50    | 1(c)(3)      |             |
|     | organization, check this box and stop her  | T (                 | .,,,                | ,          |                       | . ( ) ( )    | ▶ [ ]       |
| Sec | tion C. Computation of Public St   |                     | tage                |  |                       |              |             |
| 15  | Public support percentage for 2016 (line 8   | column (f) divide   | a by line 11, colur | rn (f))  |                       | 15           | %_          |
| 16  | Public support percentage from 2015 School   |                     |                     |  |                       | 16           | %           |
| Sec | tion D. Computation of Investme  | nt Income Pe        | rcentage            |  |                       |              |             |
| 17  | Investment income percentage for 2016 (I   | ine 10c, column (f  | ) divided by line 1 | 3, column (f))                                   |                       | 17           | %_          |
| 18  | Investment income perceritage from 2015  | Schedule A, Part    | III, line 17        |  |                       | 18           | %           |
| 19a | 33 1/3% support tests—2016 ,If the orga  |                     |                     |  |                       |              | . 1         |
|     | 17 is not more than 33 1/3%, check this b  |                     |                     |  |                       |              | <b>▶</b> 1  |
| b   | 33 1/3% support tests—2015 If the orga   |                     |                     |  |                       |              | .   ~       |
|     | line 18 is not more than 33 1/3%, check th   |                     | _                   |  |                       |              | <b>▶</b>    |
| 20  | Private foundation If the organization dis   | d not check a box   | on line 14, 19a, oi | r 19b, check this bo                             | ox and see instruc    | tions        | ▶           |

Schedule A (Form 990 or 990-EZ) 2016

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

| Saction | Λ  | ΛH  | c. | pporting C  | )ranniza | tions |
|---------|----|-----|----|-------------|----------|-------|
| Section | М. | ~11 | Jι | ibbolullu ( | Jiuaniza | LIOUS |

| ect | ion A. All Supporting Organizations  | inclose are v ) |         |              |
|-----|--|-----------------|---------|--------------|
|     |  |                 | Yes     | No           |
| 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                           | 1 1             |         |              |
| 2   | Did the organization have any supported organization that does not have an IRS determination of status                 |                 |         |              |
|     | under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported |                 |         |              |
|     | organization was described in section 509(a)(1) or (2)   | 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  | 3a              |         |              |
| b   | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and       |                 |         |              |
|     | satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the             |                 |         |              |
|     | organization made the determination  | 36              |         |              |
| С   | 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                  | 3c              |         | 1            |
| 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   | 4a              |         |              |
| 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                            | 4b              |         |              |
| С   | 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   | 4c              |         |              |
| 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)   | 5a              |         |              |
| b   | Type I or Type II only Was any added or substituted supported organization part of a class already                     |                 |         |              |
|     | designated in the organization's organizing document?  | 5b              |         |              |
| С   | Substitutions only Was the substitution the result of an event beyond the organization's control?                      | 5c              |         |              |
| 6   | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to     |                 |         |              |
|     | anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited    |                 |         |              |
|     | by one or more of its supported organizations, or (iii) other supporting organizations that also support or            |                 |         |              |
|     | benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI          | 6_              |         |              |
| 7   | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor        |                 |         |              |
|     | (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with      |                 |         |              |
|     | regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)                      | 7               |         |              |
| 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)   | 8               |         | ļ            |
| 9a  | Was the organization controlled directly or indirectly at any time during the tax year by one or more                  |                 |         | 1            |
|     | 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 <b>Part VI</b>   | 9a              |         | ļ            |
| þ   | 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.                                      | 9b              |         | <del> </del> |
| С   | 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.           | 9c              |         | <del> </del> |
| 0a  | 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  | 10a             |         |              |

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 )

|      | le A (Form 990 or 990-EZ) 2016 YOUTH FARM AND MARKET PROJE                                  |                | 41-18960                     | 055 Page 6   |
|------|---|----------------|------------------------------|--------------|
| Par  | Type in Nort Landsonany integrated 303(a)(3) Supporting Orga                                |                |                              |              |
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifying trust on No | v 20,          | 1970 (explain in Part VI) Se | е            |
| _    | instructions. All other Type III non-functionally integrated supporting organizations mus   | t com          | olete Sections A through E   |              |
| Sect | on A - Adjusted Net Income  | (A) Prior Year | (B) Current Year (optional)  |              |
| _1_  | Net short-term capital gain   | 1              |                              |              |
| 2_   | Recoveries of prior-year distributions  | 2              |                              |              |
| 3    | Other gross income (see instructions)   | 3              |                              |              |
| 4    | Add lines 1 through 3   | 4              |                              |              |
| 5    | Depreciation and depletion  | 5              |                              |              |
| 6    | Portion of operating expenses paid or incurred for production or                            |                |                              |              |
| col  | lection of gross income or for management, conservation, or                                 |                |                              |              |
|      | intenance 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 | on B - Minimum Asset Amount   | (A) Prior Year | (B) Current Year (optional)  |              |
| 1    | Aggregate fair market value of all non-exempt-use assets (see                               |                |                              |              |
| ıns  | tructions for short tax year or assets held for part of year)                               |                |                              |              |
|      | a Average monthly value of securities   | 1a             |                              |              |
|      | b Average monthly cash balances   | 1b             |                              |              |
|      | c Fair market value of other non-exempt-use assets  | 1c             |                              |              |
|      | d Total (add lines 1a, 1b, and 1c)  | 1d             |                              |              |
|      | e Discount claimed for blockage or other  |                |                              |              |
|      | factors (explain in detail in Part VI)  |                |                              |              |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets                                | 2              |                              |              |
| 3    | Subtract line 2 from line 1d  | 3              |                              |              |
| 4    | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,                 |                |                              |              |
| see  | e 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 | on 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              |                              |              |

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

3

5

6

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

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

4 Enter greater of line 2 or line 3

instructions)

5 Income tax imposed in prior year

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2016

|      | le A (Form.990 or 990-EZ) 2016 YOUTH FARM AND MA   |                             | 41-1896                                | 055 Page 7                                |  |  |  |  |  |  |  |  |
|------|--|-----------------------------|--|---|--|--|--|--|--|--|--|--|
| Par  | 77   | Supporting Organiza         | tions (continued)                      |   |  |  |  |  |  |  |  |  |
| Sect | Section D - Distributions  1    Amounts paid to supported organizations to accomplish exempt purposes  |                             |  |   |  |  |  |  |  |  |  |  |
| _1   | Amounts paid to supported organizations to accomplish exempt purpose   |                             |  |   |  |  |  |  |  |  |  |  |
| 2    | Amounts paid to perform activity that directly furthers exempt purposes  |                             |  |   |  |  |  |  |  |  |  |  |
|      | organizations, in excess of income from activity   |                             | <del> </del>                           | <del></del>                               |  |  |  |  |  |  |  |  |
| 3_   | Administrative expenses paid to accomplish exempt purposes of support  | orted organizations         |  |   |  |  |  |  |  |  |  |  |
| 4    | Amounts paid to acquire exempt-use assets  |                             |  |   |  |  |  |  |  |  |  |  |
| 5    | Qualified set-aside amounts (prior IRS approval required)  |                             |  |   |  |  |  |  |  |  |  |  |
| 6    | Other distributions (describe in Part VI) See instructions   |                             |  |   |  |  |  |  |  |  |  |  |
| 7    | Total annual distributions Add lines 1 through 6   |                             |  |   |  |  |  |  |  |  |  |  |
| 8    | Distributions to attentive supported organizations to which the organizations  | tion is responsive          |  |   |  |  |  |  |  |  |  |  |
|      | (provide details in Part VI) See instructions  | <del>-a</del>               |  |   |  |  |  |  |  |  |  |  |
| 9    | Distributable amount for 2016 from Section C, line 6   |                             |  |   |  |  |  |  |  |  |  |  |
| 10   | Line 8 amount divided by Line 9 amount   |                             | ,                                      |   |  |  |  |  |  |  |  |  |
|      | Section E - Distribution Allocations (see instructions)  | (I)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2016 | (III)<br>Distributable<br>Amount for 2016 |  |  |  |  |  |  |  |  |
| 1    | Distributable amount for 2016 from Section C, line 6   |                             |  |   |  |  |  |  |  |  |  |  |
|      | Underdistributions, if any, for years prior to 2016  |                             |  |   |  |  |  |  |  |  |  |  |
| 2    | (reasonable cause required-explain in Part VI) See   |                             |  |   |  |  |  |  |  |  |  |  |
|      | instructions   |                             |  | 4   |  |  |  |  |  |  |  |  |
| 3    | Excess distributions carryover, if any, to 2016  |                             |  |   |  |  |  |  |  |  |  |  |
| a    |  |                             | , , , , , , , , , , , , , , , , , ,    |   |  |  |  |  |  |  |  |  |
| b    |  |                             |  |   |  |  |  |  |  |  |  |  |
| С    | From 2013  |                             |  |   |  |  |  |  |  |  |  |  |
| d    | From 2014  |                             |  |   |  |  |  |  |  |  |  |  |
| е    | From 2015  |                             | · · · · · · · · · · · · · · · · · · ·  |   |  |  |  |  |  |  |  |  |
| f    | Total of lines 3a through e  |                             |  |   |  |  |  |  |  |  |  |  |
| g    | Applied to underdistributions of prior years   |                             |  |   |  |  |  |  |  |  |  |  |
| h    | Applied to 2016 distributable amount   |                             |  | · · · · · · · · · · · · · · · · · · ·     |  |  |  |  |  |  |  |  |
| 1    | Carryover from 2011 not applied (see instructions)   |                             | <del></del>                            |   |  |  |  |  |  |  |  |  |
|      | Remainder Subtract lines 3g, 3h, and 3i from 3f  |                             |  |   |  |  |  |  |  |  |  |  |
| 4    | Distributions for 2016 from  |                             |  |   |  |  |  |  |  |  |  |  |
|      | Section D, line 7 \$   |                             |  |   |  |  |  |  |  |  |  |  |
| a    | Applied to underdistributions of prior years   |                             |  |   |  |  |  |  |  |  |  |  |
| b    | Applied to 2016 distributable amount   |                             |  |   |  |  |  |  |  |  |  |  |
| С    | Remainder Subtract lines 4a and 4b from 4  |                             |  |   |  |  |  |  |  |  |  |  |
| 5    | Remaining underdistributions for years prior to 2016, if   |                             |  |   |  |  |  |  |  |  |  |  |
|      | any Subtract lines 3g and 4a from line 2 For result  |                             |  |   |  |  |  |  |  |  |  |  |
|      | greater than zero, explain in Part VI See instructions   |                             |  |   |  |  |  |  |  |  |  |  |
| 6    | Remaining underdistributions for 2016 Subtract lines 3h  |                             |  |   |  |  |  |  |  |  |  |  |
|      | and 4b from line 1. For result greater than zero, explain in   |                             |  |   |  |  |  |  |  |  |  |  |
|      | Part VI See instructions   |                             |  |   |  |  |  |  |  |  |  |  |
| 7    | Excess distributions carryover to 2017. Add lines 3j   |                             |  |   |  |  |  |  |  |  |  |  |
|      | and 4c   | <del></del>                 | <u> </u>                               |   |  |  |  |  |  |  |  |  |
| 8    | Breakdown of line 7  |                             |  |   |  |  |  |  |  |  |  |  |
| a    | The second secon |                             |  |   |  |  |  |  |  |  |  |  |
|      | Excess from 2013   |                             |  |   |  |  |  |  |  |  |  |  |
|      | Excess from 2014   |                             |  |   |  |  |  |  |  |  |  |  |
|      | Excess from 2015   |                             |  |   |  |  |  |  |  |  |  |  |
| е    | Excess from 2016   |                             |  | l   |  |  |  |  |  |  |  |  |

### 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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Open to Public Inspection

| Vame | e of the organization   |  | Employer    | dentification number            |
|------|---|--|-------------|---------------------------------|
| Y    | OUTH FARM AND MARKET PROJECT  |  |             | 896055                          |
| P    | Organizations Maintaining Donor Advised Fur<br>Complete if the organization answered "Yes" on F                                 | nds or Other Similar Funds or A<br>Form 990, Part IV, line 6 | Account     | s.                              |
|      |   | (a) Donor advised funds                                      | {b          | ) Funds and other accounts      |
| 1    | Total number at end of year   |  | <u>`</u>    | ,                               |
| 2    | Aggregate value of contributions to (during year)   |  |             | <del></del>                     |
| 3    | Aggregate value of grants from (during year)  |  |             |                                 |
| 4    | Aggregate value at end of year  |  |             |                                 |
| 5    | Did the organization inform all donors and donor advisors in writing that   | the assets held in donor advised                             |             |                                 |
|      | funds are the organization's property, subject to the organization's excli  |  |             | Yes   No                        |
| 6    | Did the organization inform all grantees, donors, and donor advisors in   | •  |             | _  103     110                  |
|      | only for charitable purposes and not for the benefit of the donor or donor  |  |             |                                 |
|      | conferring impermissible private benefit?   | advisor, or for any other purpose                            |             | Yes No                          |
| P    | art II Conservation Easements.  |  |             | [ ] 163 [ 110                   |
|      | Complete if the organization answered "Yes" on F  | <del></del>  |             |                                 |
| 1    | Purpose(s) of conservation easements held by the organization (check  | all that apply)  |             |                                 |
|      | Preservation of land for public use (e.g., recreation or education)   | Preservation of a historically impo                          | ortant land | area                            |
|      | Protection of natural habitat   | Preservation of a certified historic                         | structure   |                                 |
|      | Preservation of open space  |  |             |                                 |
| 2    | Complete lines 2a through 2d if the organization held a qualified conser  | vation contribution in the form of a conse                   | rvation     |                                 |
|      | 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 structure inclination  | uded in (a)  | 2c          |                                 |
| d    | Number of conservation easements included in (c) acquired after 8/17/0  | 06, and not on a   |             |                                 |
|      | historic structure listed in the National Register  |  | 2d          |                                 |
| 3    | Number of conservation easements modified, transferred, released, extended tax year ▶   | inguished, or terminated by the organizat                    | tion during | the                             |
| 4    | Number of states where property subject to conservation easement is le  | ocated >   |             |                                 |
| 5    | Does the organization have a written policy regarding the periodic moni   |  |             |                                 |
|      | violations, and enforcement of the conservation easements it holds?   | toring, inspection, nariding of                              |             | Yes No                          |
| 6    | Staff and volunteer hours devoted to monitoring, inspecting, handling or  | f violations, and enforcing conservation e                   | asements    | 1                               |
| ŭ    |   | violations, and emorning conservation e                      | asements    | during the year                 |
| 7    | Amount of expenses incurred in monitoring, inspecting, handling of viol.  | ations, and enforcing conservation easen                     | nents durir | ng the year                     |
|      | > \$  | 4  |             |                                 |
| 8    | Does each conservation easement reported on line 2(d) above satisfy t   | ne requirements of section 170(n)(4)(B)(I                    | )           | Yes No                          |
| •    | and section 170(h)(4)(B)(ii)?   |  |             | res {   No                      |
| 9    | In Part XIII, describe how the organization reports conservation easemed  | ·  |             | 20                              |
|      | balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements | organization's ilitaricial statements that u                 | escribes ti | 10                              |
| P:   | art III Organizations Maintaining Collections of Art,   | Historical Treasures or Other                                | Similar     |                                 |
|      | Complete if the organization answered "Yes" on F  |  |             |                                 |
| 1a   | If the organization elected, as permitted under SFAS 116 (ASC 958), no  | ot to report in its revenue statement and t                  | balance sh  | eet                             |
|      | works of art, historical treasures, or other similar assets held for public   | exhibition, education, or research in furth                  | erance of   |                                 |
|      | public service, provide, in Part XIII, the text of the footnote to its financial  | al statements that describes these items                     |             |                                 |
| b    | If the organization elected, as permitted under SFAS 116 (ASC 958), to  | report in its revenue statement and bala                     | nce sheet   |                                 |
|      | works of art, historical treasures, or other similar assets held for public   | exhibition, education, or research in furth                  | erance of   |                                 |
|      | public service, provide the following amounts relating to these items   |  |             |                                 |
|      | (i) Revenue included on Form 990, Part VIII, line 1   |  | <b>&gt;</b> | \$                              |
|      | (II) Assets included in Form 990, Part X  |  | <b>&gt;</b> | \$                              |
| 2    | If the organization received or held works of art, historical treasures, or   | other similar assets for financial gain, pro                 | ovide the   |                                 |
|      | following amounts required to be reported under SFAS 116 (ASC 958)  | relating to these items                                      |             |                                 |
| а    | Revenue included on Form 990, Part VIII, line 1   |  | •           | \$                              |
| b    | Assets included in Form 990, Part X   |  | •           | \$                              |

| Schedule D        | <u>(Form 990)</u> 2016 YOUTH F                                     | 'ARM AND MAR                            | KET PROJEC'              | Γ                | 41-18960        | )55            | Page <b>2</b>                         |
|-------------------|--|---|--------------------------|------------------|-----------------|----------------|---------------------------------------|
| Part III          | Organizations Maintair   | ning Collections o                      | f Art. Historical        | Treasures. c     |                 |                |                                       |
| 3 Using collect   | the organization's acquisition, accionitems (check all that apply) |   |                          |                  |                 |                | 1                                     |
| a Pı              | iblic exhibition   | d 🗍                                     | Loan or exchange p       | rograms          |                 |                |                                       |
| b Sc              | holarly research   | e                                       | Other                    | -5               |                 |                |                                       |
| ===               | eservation for future generations                                  | • 🗀                                     | 011.01                   |                  |                 |                |                                       |
|                   | e a description of the organization                                | 's collections and evolu-               | n how they further the   | organization's   | evernt nurnose  | un Dart        |                                       |
| XIII              | o a docomption of the organization                                 | 3 concentoris and explai                | ii now they further the  | e organization s | exempt purpose  | mrait          |                                       |
|                   | the year, did the organization soli                                | cit or receive donations                | of art, historical trans | ures or other s  | ımılar          |                |                                       |
|                   | to be sold to raise funds rather that                              |   |                          |                  | iiiiiai         |                | Yes No                                |
| Part IV           | Escrow and Custodial   |   | part of the organization | on's collection? |                 |                | Yes   No                              |
| 1 41(1)           | Complete if the organization                                       |   | " on Form 000 E          | ort IV/ June O   | or roported     | an amount (    | on Corm                               |
|                   | 990, Part X, line 21   | uon answered Tes                        | 00 F0101 990, F          | artiv, line 9    | , or reported a | an amount c    | וו רטוווו                             |
| 4- 1-41-          |  |   |                          |                  | <del></del>     |                |                                       |
|                   | organization an agent, trustee, cus                                | todian or other intermed                | diary for contributions  | or other assets  | not             |                | (T) (T)                               |
|                   | ed on Form 990, Part X?  |   |                          |                  |                 |                | Yes No                                |
| b If "Yes         | " explain the arrangement in Part                                  | XIII and complete the fo                | ollowing table           |                  |                 | <del></del>    | <del></del>                           |
|                   |  |   |                          |                  |                 |                | Amount                                |
| c Beginr          | ing balance  |   |                          |                  |                 | 1c             |                                       |
| <b>d</b> Addition | ns during the year   |   |                          |                  |                 | 1d             |                                       |
| e Distrib         | utions during the year   |   |                          |                  |                 | 1e             |                                       |
| f Ending          | balance  |   |                          |                  |                 | 1f             |                                       |
| 2a Did the        | e organization include an amount o                                 | on Form 990, Part X, line               | e 21, for escrow or cu   | stodial account  | liability?      |                | Yes No                                |
|                   | ," explain the arrangement in Part                                 |   |                          |                  | •               |                | ''   t                                |
| Part V            | Endowment Funds.   | · · · · · · · · · · · · · · · · · · ·   | _1                       |                  |                 | ·              |                                       |
|                   | Complete if the organizat  | tion answered "Yes                      | " on Form 990. P         | art IV. line 10  | 0               |                |                                       |
|                   |  | (a) Current year                        | (b) Prior year           | (c) Two years    |                 | ree years back | (e) Four years back                   |
| 1a Region         | ing of year balance  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | (,, ,                    |                  | ,,,,            |                | · · · · · · · · · · · · · · · · · · · |
| b Contrib         | • •  |   |                          |                  | <u> </u>        |                |                                       |
|                   |  |   |                          |                  |                 |                |                                       |
|                   | estment earnings, gains, and                                       |   |                          |                  |                 |                |                                       |
| losses            | Late I   |   |                          |                  |                 |                |                                       |
|                   | or scholarships  |   |                          |                  | <del></del>     |                |                                       |
| e Other           | expenditures for facilities and                                    |   |                          |                  |                 |                |                                       |
| progra            |  |   |                          |                  |                 | <del></del>    |                                       |
| f Admın           | strative expenses  |   |                          |                  |                 |                |                                       |
| g End of          | year balance   |   |                          |                  |                 |                | <u></u>                               |
| 2 Provide         | e the estimated percentage of the                                  | current year end baland                 | e (line 1g, column (a    | )) held as       |                 |                |                                       |
| a Board           | designated or quasi-endowment ▶                                    | %                                       |                          |                  |                 |                |                                       |
| b Perma           | nent endowment 🕨   | %                                       |                          |                  |                 |                |                                       |
| c Tempo           | rarily restricted endowment  | %                                       |                          |                  |                 |                |                                       |
| The pe            | rcentages on lines 2a, 2b, and 2c                                  | should equal 100%                       |                          |                  |                 |                |                                       |
| 3a Are the        | ere endowment funds not in the po                                  | ssession of the organiz                 | ation that are held an   | d administered   | for the         |                |                                       |
| organi            | zation by  | _                                       |                          |                  |                 |                | Yes No                                |
| -                 | related organizations  |   |                          |                  |                 |                | 3a(ı)                                 |
|                   | ated organizations   |   |                          |                  |                 |                | 3a(II)                                |
|                   | on line 3a(ii), are the related orga                               | nizations listed as requ                | ired on Schedule R?      |                  |                 |                | 3b                                    |
|                   | be in Part XIII the intended uses of                               | -                                       |                          |                  |                 |                | <u> </u>                              |
| Part VI           | Land, Buildings, and E   |   | 5WITICITE TURIOS         |                  |                 |                |                                       |
| . 4.0 01          | Complete if the organization                                       | •                                       | " on Form 990 B          | art IV line 1    | 1a See Form     | 000 Part )     | K line 10                             |
| ,                 | Description of property  | (a) Cost or other                       |                          | r other basis    | (c) Accumulate  |                | (d) Book value                        |
|                   | Description of property  | 1 ''                                    | 1 ' '                    | ther)            | depreciation    | i              | (d) Book value                        |
|                   |  | (investment)                            | , (0                     | (1)              |                 |                |                                       |
| 1a Land           |  |   |                          | 45 000           | 4.5             | 020            |                                       |
| b Buildin         | ·  |   |                          | 45,028           | 45              | ,028           |                                       |
|                   | nold improvements  |   |                          | 0.5 5.5          |                 |                |                                       |
| d Equipr          | nent   |   |                          | 96,323           | 90              | ,883           | 5,440                                 |
| e Other           |  |   |                          |                  |                 |                |                                       |
| Total Add II      | nes 1a through 1e (Column (d) mu                                   | ust equal Form 990, Pa                  | rt X, column (B), line   | 10c)             |                 | <b>&gt;</b>    | 5,440                                 |
|                   |  |   |                          |                  |                 |                |                                       |

| Part VII      | Investments—Other Securities.                                      | <del></del>                   |                                 |                |
|---------------|--|-------------------------------|---------------------------------|----------------|
|               | Complete if the organization answered "Yes" or                     | n Form 990, Part IV, Iir      | ne 11b See Form 990, Pa         | art X, line 12 |
|               | (a) Description of security or category                            | (b) Book value                | (c) Method of v                 | aluation       |
|               | (including name of security)                                       |                               | Cost or end-of-year             | market value   |
| (1) Financial |  |                               |                                 | <del> </del>   |
| -             | eld equity interests   |                               |                                 |                |
| (3) Other     |  |                               |                                 |                |
| (A)           |  |                               |                                 |                |
| (B)           |  |                               |                                 |                |
| (C)           |  |                               |                                 |                |
| (D)           |  |                               |                                 |                |
| (E)           |  |                               |                                 |                |
| (F)           |  |                               |                                 |                |
| (G)           |  |                               |                                 |                |
| (H)           |  |                               |                                 |                |
| Total (Colum  | nn (b) must equal Form 990, Part X, col (B) line 12 ) ▶            |                               |                                 |                |
| Part VIII     | Investments—Program Related.                                       |                               |                                 |                |
|               | Complete if the organization answered "Yes" or                     | n Form 990, Part IV, lir      | ne 11c See Form 990, Pa         | art X, line 13 |
| _             | (a) Description of investment                                      | (b) Book value                | (c) Method of v                 |                |
|               |  |                               | Cost or end-of-year             | market value   |
| (1)           |  |                               |                                 |                |
| (2)           |  |                               |                                 |                |
| (3)           |  |                               |                                 | -              |
| (4)           |  |                               |                                 |                |
| (5)           |  |                               |                                 | · -            |
| (6)           |  |                               |                                 |                |
| (7)           |  |                               |                                 |                |
| (8)           |  |                               |                                 |                |
| (9)           |  |                               |                                 |                |
|               | nn (b) must equal Form 990, Part X, col. (B) line 13 ) ▶           |                               |                                 |                |
| Part IX       | Other Assets.  |                               | •                               |                |
|               | Complete if the organization answered "Yes" or                     | n Form 990, Part IV, Iir      | ne 11d See Form 990, Pa         | art X, line 15 |
|               | (a) Description  |                               |                                 | (b) Book value |
| (1)           |  |                               |                                 |                |
| (2)           |  |                               |                                 |                |
| (3)           |  |                               |                                 |                |
| (4)           |  |                               |                                 |                |
| (5)           |  |                               |                                 |                |
| (6)           |  | •                             |                                 |                |
| (7)           |  |                               |                                 |                |
| (8)           |  |                               |                                 | ****           |
| (9)           |  |                               |                                 |                |
|               | nn (b) must equal Form 990, Part X, col. (B) line 15)              |                               | <b>&gt;</b>                     |                |
| Part X        | Other Liabilities.   |                               |                                 | ·              |
|               | Complete if the organization answered "Yes" or                     | n Form 990, Part IV, Iir      | ne 11e or 11f See Form 9        | 990, Part X,   |
|               | line 25  |                               |                                 |                |
| 1.            | (a) Description of liability                                       | (b) Book value                |                                 |                |
| (1) Federal   | income taxes   |                               | 7                               |                |
| (2)           |  |                               | 7                               |                |
| (3)           |  |                               | 7                               |                |
| (4)           |  |                               | 7                               |                |
| (5)           |  |                               |                                 |                |
| (6)           |  |                               | 7                               |                |
| (7)           |  | <u> </u>                      | 7                               |                |
| (8)           |  |                               | 7                               |                |
| (9)           |  |                               | 7                               |                |
|               | nn (b) must equal Form 990, Part X, col (B) line 25 ) ▶            |                               | 1                               |                |
|               | cuncertain tax positions. In Part XIII, provide the text of the fo | introte to the organization's | financial statements that repor | ts the         |

|    | dule D (Form 990) 2016 YOUTH FARM AND MARKET PROJEC                              |                         |         | Page <b>4</b> |
|----|--|-------------------------|---------|---------------|
| Pa | art XI Reconciliation of Revenue per Audited Financial Stater                    |                         | eturn.  |               |
|    | Complete if the organization answered "Yes" on Form 990,                         | Part IV, line 12a       |         |               |
| 1  | Total revenue, gains, and other support per audited financial statements         |                         | 1       | 1,023,290     |
| 2  | Amounts included on line 1 but not on Form 990, Part VIII, line 12               |                         |         |               |
| а  | Net unrealized gains (losses) on investments                                     | 2a                      | J       |               |
| b  | Donated services and use of facilities   | 2b 160,714              | []      |               |
| С  | Recoveries of prior year grants  | 2c                      |         |               |
| ď  | Other (Describe in Part XIII )   | 2d 8,005                | 5       |               |
| е  | Add lines 2a through 2d  |                         | 2e      | 168,719       |
| 3  | Subtract line 2e from line 1   |                         | 3       | 854,571       |
| 4  | Amounts included on Form 990, Part VIII, line 12, but not on line 1              |                         |         |               |
| а  | Investment expenses not included on Form 990, Part VIII, line 7b                 | 4a                      |         |               |
| b  | Other (Describe in Part XIII )   | 4b                      | ]       |               |
| С  | Add lines 4a and 4b  |                         | 4c      |               |
| 5  | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)    |                         | 5       | 854,571       |
| Pa | rt XII Reconciliation of Expenses per Audited Financial State                    | ments With Expenses per | Return. |               |
|    | Complete if the organization answered "Yes" on Form 990,                         | Part IV, line 12a       |         |               |
| 1  | Total expenses and losses per audited financial statements                       |                         | 1       | 815,592       |
| 2  | Amounts included on line 1 but not on Form 990, Part IX, line 25                 |                         |         |               |
| а  | Donated services and use of facilities   | 2a 160,714              |         |               |
| b  | Prior year adjustments   | 2b                      |         |               |
| C  | Other losses   | 2c                      |         |               |
| d  | Other (Describe in Part XIII )   | 2d 8,005                | 5       |               |
| е  | Add lines 2a through 2d  |                         | 2e      | 168,719       |
| 3  | Subtract line 2e from line 1   |                         | 3       | 646,873       |
| 4  | Amounts included on Form 990, Part IX, line 25, but not on line 1                |                         |         |               |
| а  | Investment expenses not included on Form 990, Part VIII, line 7b                 | 4a                      | ]       |               |
| b  | Other (Describe in Part XIII )   | 4b                      | ]       |               |
| С  | Add lines 4a and 4b  |                         | 4c      |               |
| 5  | Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) |                         | 5       | 646.873       |

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Part X - FIN 48 Footnote

The Organization is exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code and is not considered a private foundation.

Management has evaluated for uncertain tax positions and has determined there are no uncertain tax positions as of September 30, 2017. Tax returns for the past three years remain open for examination by tax jurisdictions.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

FUNDRAISING EVENT EXPENSES \$ 8,005

Part XII, Line 2d - Expense Amounts Included in Financials - Other
FUNDRAISING EVENT EXPENSES \$ 8,005

Department of the Treasury

Internal Revenue Service

# SCHEDULE.G (Form 990 or 990-EZ)

90-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

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2016

Open to Public Inspection

| YOUTH FARM  | AND MARK           | KET PROT          | ECT      |                   |                                   | 41-1896                                  |                               |
|---|--------------------|-------------------|----------|-------------------|-----------------------------------|--|-------------------------------|
| Part I Fundraising Activities.  |                    |                   |          | swe               | red "Yes" on Form !               |  |                               |
| Form 990-EZ filers are no   | ot required to     | complete th       | ıs par   | t                 |                                   |  | W75 .                         |
| 1 Indicate whether the organization raised fi   | unds through a     | ny of the followi | ng activ | rities            | Check all that apply              |  |                               |
| a Mail solicitations  | е                  | Solicitatio       | n of no  | n-gov             | vernment grants                   |  |                               |
| b Internet and email solicitations  | f                  | Solicitation      | n of go  | vernr             | nent grants                       |  |                               |
| c Phone solicitations   | g                  | Special fu        | ındraisi | ng ev             | rents                             |  |                               |
| d   In-person solicitations   |                    |                   |          |                   |                                   |  |                               |
| 2a Did the organization have a written or oral<br>or key employees listed in Form 990, Part | VII) or entity in  | n connection wit  | h profe  | ssion             | al fundraising services?          |  | Yes   No                      |
| b If "Yes," list the 10 highest paid individuals compensated at least \$5,000 by the organ  | s or entities (fur | ndraisers) pursu  | ant to a | agree             | ments under which the f           | undraiser is to be                       |                               |
|   |                    |                   |          | d fund-<br>r have |                                   | (v) Amount paid to                       | (vi) Amount paid to           |
| (i) Name and address of individual<br>or entity (fundraiser)                                |                    | (II) Activity     | custo    | ody or<br>rol of  | (iv) Gross receipts from activity | (or retained by)<br>fundraiser listed in | (or retained by) organization |
|   |                    |                   |          | utions?           |                                   | col (ı)                                  | 0.922                         |
|   |                    |                   | Yes      | No                |                                   |  |                               |
| 1   |                    |                   |          |                   |                                   |  |                               |
| 2   |                    |                   | +        |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| 3   |                    |                   | _        |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| 4   |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| 5   |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| 6   |                    |                   |          |                   |                                   |  |                               |
| •   |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   | ~ <del></del>                            |                               |
| 7   |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          | L                 |                                   |  |                               |
| 8   |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| 9   |                    |                   | +        |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| 10  |                    |                   |          |                   |                                   |  |                               |
| 10  |                    |                   |          |                   |                                   |  |                               |
|   |                    |                   |          |                   |                                   |  |                               |
| Total   |                    |                   |          |                   |                                   |  |                               |

|        | art | than \$15,000 or                   | vent<br>f fun    | s. Complete draising even   | it contribution               | ızatı  | on answere   | d "Yes" on | Fo                              | orn                                   | n 990, Part I | V, line 1 | 96055<br>18, or repor<br>16b List ev                   | Page 2<br>ted more<br>ents with        |  |
|--------|-----|------------------------------------|------------------|---|-------------------------------|--------|--------------|------------|---------------------------------|---------------------------------------|---------------|-----------|--|--|--|
| 11     |     | gross receipts o                   |                  | TASTE OF THE FA (event type) (event type)                                 |                               |        |              |            |                                 | (c) Other events  None (total number) |               |           | (d) Total events<br>(add col. (a) through<br>col. (c)) |  |  |
| ייביים | 1   | Gross receipts                     |                  |   | 45,232                        |        |              | -          |                                 |                                       |               |           | 4  | 45,232                                 |  |
|        | ì   | Less Contributions                 |                  | <del></del>   | 29,155                        |        |              |            |                                 |                                       |               |           |  | 29,155                                 |  |
|        |     | Gross income (line 1 minus line 2) |                  |   | 16,077                        |        |              |            | _                               |                                       |               |           | -  | 16,077                                 |  |
|        | 4   | Cash prizes                        |                  |   |                               |        |              |            |                                 |                                       |               |           |  |  |  |
|        | 5   | Noncash prizes                     |                  |   |                               |        |              |            | _                               | -                                     |               |           |  |  |  |
| 2      | 6   | Rent/facility costs                |                  |   |                               |        |              |            | ļ                               |                                       |               |           |  |  |  |
|        | 7   | Food and beverages                 |                  |   |                               |        |              |            | _                               |                                       | ••            |           |  |  |  |
| 25     | 8   | Entertainment                      |                  |   |                               |        | <del>-</del> |            |                                 |                                       |               |           |  |  |  |
| i      | 9   | Other direct expenses              |                  |   | 8,005                         |        |              |            |                                 |                                       |               |           |  | 8,005                                  |  |
| P      |     | J                                  | <sub>btrac</sub> | t line 10 from line<br>of the organiz                                     | e 3, column (c<br>zation answ | i)     | I "Yes" on F | orm 990, F | <br>Par                         | rt l'                                 | V, line 19, o | r reporte | ed more  | 8,005<br>8,072                         |  |
|        |     | than \$15,000 c                    | n Fo             | (a) Bingo (b) Pull tabs/instant (c) Other garning bingo/progressive bingo |                               |        |              | 9          | (d) Total gar<br>col (a) throug | • .                                   |               |           |  |  |  |
| ?      | 1   | Gross revenue                      |                  |   |                               |        |              |            |                                 |                                       |               |           |  |  |  |
|        | 2   | Cash prizes                        | <del></del>      |   |                               |        |              |            |                                 |                                       |               |           |  |  |  |
|        | 3   | Noncash prizes                     |                  |   |                               |        |              |            | <u> </u>                        |                                       |               |           |  |  |  |
|        | 4   | Rent/facility costs                | ·.               |   |                               |        |              |            | _                               |                                       |               |           | <del> </del>   |  |  |
|        | 5   | Other direct expenses              | -1-              | <u></u> -   |                               |        |              |            | ļ.,                             | ·                                     |               |           |  |  |  |
|        | 6   | Volunteer labor                    |                  | Yes<br>No   | %                             |        | Yes<br>No    | %          |                                 |                                       | Yes<br>No     | %         |  | ······································ |  |
|        | 7   | Direct expense summary             | Add              | lines 2 through 5   | 5 ın column (d                | )      |              |            |                                 |                                       |               | •         |  |  |  |
|        | 8   | Net gaming income sumn             | nary             | Subtract line 7 fi  | rom line 1, col               | lumn ( | (d)          |            |                                 |                                       |               | •         |  |  |  |

\_\_ Yes [ | No

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "No," explain

b If "Yes," explain

| 11 Does the organization conduct gaming activities with nonmembers?    Yes   National Programment   National Nation | Sche | dule G (Form 990 or 990-EZ) 2016 YOUTH FARM AND MARKET PROJECT 41-189605                                       | 5 Page <b>3</b> |
|---|------|--|-----------------|
| tormed to administer chantable gaming?    Tyes   Na   Na   Na notiside facility   13a   1 | 11   | Does the organization conduct gaming activities with nonmembers?   |                 |
| a The organization's facility  Interest the percentage of gaming activity conducted in  a The organization's facility  An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events books and records  Name  Address  Address  Does the organization have a contract with a third party from whom the organization receives gaming revenue?  If 'Yes,' enter the amount of gaming revenue received by the organization PS and the amount of gaming revenue retained by the third party S S  If 'Yes,' enter name and address of the third party  Name  Address  Gaming manager information  Name  Gaming manager compensation S S  Description of services provided C Employee Independent contractor  Director/officer Employee Independent contractor  Mandatory distributions  is the organization required under state law to make chantable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or service specific the organization's own exempt activities the axypean S S  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information  | 12   | Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity |                 |
| a The organization's facility b An outside facility 13a   |      | formed to administer charitable gaming?  | Yes No          |
| b An outside facility  13b  | 13   | Indicate the percentage of gaming activity conducted in  |                 |
| Enter the name and address of the person who prepares the organization's gaming/special events books and records  Name ►  Address ►  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$  c If "Yes," enter name and address of the third party  Name ►  Address ►  16 Gaming manager information  Name ►  Gaming manager compensation ► \$  Description of services provided ►  □ Director/officer □ Employee □ Independent contractor  17 Mandatory distributions  a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the lax year ► \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information  | а    | · · · · · · · · · · · · · · · · · · ·  |                 |
| Name ►  Address ►  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$  c If "Yes," enter name and address of the third party  Name ►  Address ►  16 Gaming manager information  Name ►  Gaming manager compensation ► \$  Description of services provided ►  □ Director/officer □ Employee □ Independent contractor  17 Mandatory distributions  a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information  | b    |  | %_              |
| Address ►  Address ►  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$ if "Yes," enter name and address of the third party  Name ►  Address ►  16 Gaming manager information  Name ►  Gaming manager compensation ► \$  Description of services provided ►  Director/officer Employee Independent contractor  17 Mandatory distributions  a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.   | 14   |  |                 |
| Address ►  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?   |      | records  |                 |
| Does the organization have a contract with a third party from whom the organization receives gaming revenue?  If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$  If "Yes," enter name and address of the third party ▶ \$  If "Yes," enter name and address of the third party  Name ▶  Address ▶  Gaming manager information  Name ▶  Gaming manager compensation ▶ \$  Description of services provided ▶  Director/officer  |      | Name ►   |                 |
| revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$  c If "Yes," enter name and address of the third party  Name ▶  Address ▶  Gaming manager information  Name ▶  Gaming manager compensation ▶ \$  Description of services provided ▶  □ Director/officer □ Employee □ Independent contractor  17 Mandatory distributions  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information   |      | Address ▶  |                 |
| b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$  c If "Yes," enter name and address of the third party  Name ▶  Address ▶  16 Gaming manager information  Name ▶  Gaming manager compensation ▶ \$  Description of services provided ▶  □ Director/officer □ Employee □ Independent contractor  17 Mandatory distributions  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations required by Part II, line 2b, columns (iii) and (iv), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information  | 15a  |  | ☐ Van ☐ No      |
| amount of gaming revenue retained by the third party    c If "Yes," enter name and address of the third party  Name    Address    Address    Gaming manager information  Name    Gaming manager compensation    \$  Description of services provided    Director/officer   Employee   Independent contractor  Independent contractor  Independent contractor  Independent contractor  Independent contractor  The mandatory distributions  Independent contractor  Independent contractor  Independent contractor  Independent contractor  Independent contractor  Independent contractor  Supplemental information. Independent contractor in the organization required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year    Supplemental Information. Provide the explanation's required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information   | h    |  | res No          |
| C If "Yes," enter name and address of the third party  Name ▶  Address ▶  16 Gaming manager information  Name ▶  Gaming manager compensation ▶ \$  Description of services provided ▶  Director/officer Employee Independent contractor  17 Mandatory distributions  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information  |      | · · · · · · · · · · · · · · · · · · ·  |                 |
| Name ►  Address ►  16 Gaming manager information  Name ►  Gaming manager compensation ► \$  Description of services provided ►  Director/officer  | С    |  |                 |
| Address ►  16 Gaming manager information  Name ►  Gaming manager compensation ► \$  Description of services provided ►  Director/officer  |      | , , , , , , , , , , , , , , , , , , ,  |                 |
| Name ►  Gaming manager compensation ► \$  Description of services provided ►  Director/officer  |      | Name ▶   |                 |
| Name ►  Gaming manager compensation ► \$  Description of services provided ►  Director/officer  |      | Address ▶  |                 |
| Name ►  Gaming manager compensation ► \$  Description of services provided ►  Director/officer  |      |  |                 |
| Gaming manager compensation ▶ \$  Description of services provided ▶  Director/officer Employee Independent contractor  17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information   | 16   | Gaming manager information   |                 |
| Director/officer  |      | Name ►   |                 |
| Director/officer  |      | Gaming manager compensation ▶ \$   |                 |
| <ul> <li>Mandatory distributions         <ul> <li>Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$</li> </ul> </li> <li>Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information</li> </ul>  |      | Description of services provided ▶   |                 |
| a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information   |      | Director/officer Employee Independent contractor   |                 |
| a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information   | 17   | Mandatory distributions  |                 |
| retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information   |      | ·  |                 |
| b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.   | _    |  | Yes No          |
| Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information  | b    | Enter the amount of distributions required under state law to be distributed to other exempt organizations or  |                 |
| Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information  |      |  |                 |
| See instructions  | Par  |  |                 |
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### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

rs.gov/form990. Inspection
Employer identification number

YOUTH FARM AND MARKET PROJECT

41-1896055

Form 990 - Organization's Mission or Most Significant Activities

Youth Farm's mission is - We Farm to Grow. We Grow Food, Community and

Leaders.

Youth Farm's program goals include:

- Creating neighborhood connectedness and opportunities for contribution by increasing the knowledge and ability to access neighborhood resources and gaining community organizing skills
- Contributing to the positive identity of youth and children by increasing self-esteem and developing a sense of purpose and personal power
- Promoting healthy minds and bodies through increased access to and consumption of fresh produce, increased physical activity, and increased skills and knowledge of healthy, seasonal eating and cooking among youth and families
- Building young leaders by increasing critical thinking, decision making, and problem solving through farming, project management, work readiness and evaluation
- Developing and nurturing healthy relationships by developing social and emotional skills, cultural competencies, role modeling and mentoring skills

Youth Farm's most significant activities include:

- In-school and after school farming and cooking
- Summer farming and cooking (Summer Leadership Institute)
- Food distribution for cooking classes, summer lunches, and community meals

Name of the organization

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#### YOUTH FARM AND MARKET PROJECT

Employer identification number

41-1896055

- Food distribution through family food shares
- Community dinners and events
- Family and community farm work and harvest days
- School year Project LEAD (high school age students) internships
- Summer Project LEAD (high school age students) employment
- Neighborhood based community organizing and partnership development

Form 990 - Organization's Mission

Youth Farm's mission is - We Farm to Grow Food, Community and Leaders. Established in 1995, Youth Farm works with youth ages 9 through 24 in five Twin Cities neighborhoods. Youth Farm helps youth develop by teaching them to plant, grow, harvest, cook, and ultimately feed the communities where they live. Our youth learn how to thrive and have a positive impact on the world around them.

Form 990, Part I, Line 6
Volunteers are needed as follows:

#### For Individuals:

Garden work: Youth Farm takes volunteers between April 15 and September 30th in the gardens, either at scheduled workdays or independently. Working with youth: Between October 1st and December 1st as well as between February 1st and May 30th, Youth Farm offers many afterschool activities and classes, generally between the hours of 3pm and 6pm, Monday through Thursday. Generally, 1-3 volunteers are needed per class. Special events: Youth Farm offers several special events each year that require larger numbers of volunteers.

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#### For Groups:

Youth Farm relies heavily on volunteer groups for starting and maintaining our urban farms. The gardening season runs May 1 through October 1. Youth Farm welcomes groups of 5-20 people for workdays ranging from 2-3 hours. Work may include: digging beds, moving compost, transplanting small plants from the greenhouse, garden cleaning and brush removal, making new beds, and more.

#### Board of Directors:

Youth Farm has 8 extremely talented and energetic board members with expertise and experience in youth development, non-profit management, small business, corporate community relations, education, adolescent development, as well as communications and public relations. Youth Farm Board of Directors has two committees that strengthen the goals of the organizations: the Finance Committee and the Development and Communications/Marketing Committee. Each committee completes yearly work plans to focus their efforts and provide direction to board and staff members. Over the last 2 years, Youth Farm added 5 additional board members as a part of the organization's efforts to strengthen and diversify the Board, strategically recruiting from the neighborhoods Youth Farm works in, as well as local chefs, business partners and former Youth Farmers who are now adults. In 2016-17, 100% of the Board of Directors made financial contributions to Youth Farm.

Youth Farm board members support the organization much beyond the required oversight of mission and finances, and the board meetings and committee

Name of the organization

YOUTH FARM AND MARKET PROJECT

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meetings, but are engaged in donor development, event management, and getting their "hands dirty" in the broader support of Youth Farm's mission and programs. Board members extend the Youth Farm network through on site events, as well as lunch tours and farm visits.

Youth Farm's volunteer board members are vital to our organization's success and effectiveness. In addition to attending and being active participants at our every other month board meetings and monthly committee meetings, board members advocate for, and are community representatives of Youth Farm, while providing fiduciary oversight, responsible participation in the board decision-making process (ensure that the overall direction of the organization is in keeping with its mission). Youth Farm board members also play an important role in the recruitment and orientation of new board members. Furthermore, Youth Farm board members participate in a variety of personal and event fundraising throughout the year in an effort to best support our mission and programs. Board members terms are 3 years with a maximum of two 3 year terms.

Form 990, Part III, Line 4a - First Accomplishment

- 9 Youth Farm "graduates" ages 19 24 hired as Farm Stewards Fellows
- over 10,000 healthy meals prepared and distributed

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Draft Form 990 reviewed by Board; any questions are raised at this time. Once approved, direction given to the Executive Director to finalize the Form 990 for filing. The action of approval is documented in the Board minutes.

Employer identification number

41-1896055

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy At the beginning of each Board of Director's term of service, and annually thereafter, each Director must complete a conflict of interest disclosure Upon hiring and annually thereafter, each Staff must complete a conflict of interest disclosure form. The Director and Staff must also update the disclosure statement if a change in personal circumstances causes the previously submitted disclosure to be no longer correct. addition, when a Director or Staff is aware of a potential conflict of interest concerning an agenda item in a Youth Farm meeting, the Director or Staff must promptly disclose that conflict to the Chair, to the full Board, or to the Executive Director, as appropriate. Youth Farm has a schedule detailing the Reviewing Authority for each completed conflict of interest disclosure form. The appropriate Reviewing Authority has three possible courses of action with respect to each statement in which a conflict is disclosed. Any disagreement between the Director or Staff and the Reviewing Authority may be submitted to the Youth Farm Executive Committee for resolution.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Board of Directors performs annual review of Executive Director, by annual review of performance of job duties as described in job description. This process is led by the Board Chair. Any compensation changes are based on Youth Farm staff salary compensation plan (passed by the board of directors in 2016). Outcomes of this annual review and any changes in compensation are documented in writing (by both Executive Director and Board Chair) and stored in Executive Director's personnel file. Board minutes will reflect

Name of the organization

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date of review, who performed review, and any subsequent salary changes.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Executive Director performs annual review of all key personnel, by annual review of performance on job duties as described in job description(s). Any compensation changes are based on Youth Farm's staff salary compensation plan (passed by the board of directors in 2016). Outcomes of this annual review and any changes in compensation are documented in writing (by both Executive Director and key employee) and stored in staff members personnel file.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation THE ORGANIZATION'S FORM 990 AND OTHER INFORMATION IS AVAILABLE AT THE ORGANIZATION'S OFFICE UPON REQUEST.

FORM 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

FUNDRAISING EVENT EXPENSES

\$ 8,005

FUNDRAISING EVENT EXPENSES

\$ -8,005