# Form **990**

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 black lung benefit trust or private foundation)

The exception may have to use a copy of this return to estifut state reporting requirements

OMB No 1545-0047
2009
Open to Public

Form **990** (2009)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection Internal Revenue Service For the 2009 calendar year, or tax year beginning and ending Please Check if applicable C Name of organization YOUTH GARDEN PROJECT D Employer identification number use IRS Address change Doing Business As 87-0568051 fabel or print or Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number type. Initial return 530 SOUTH 400 EAST See 435-259-2326 Specific Terminated City or town, state or country, and ZIP + 4 Instruc-Amended return MOAR UT 84532 G Gross receipts \$ 286.829 tions Application pending Name and address of principal officer: Yes X H(a) Is this a group return for affiliates? JEN SADOFF 530 S. 400 E., MOAB, UT 84532 H(b) Are all affiliates included? Tax-exempt status: | X 501(c) ( If "No," attach a list (see instructions) 3 ) **◄** (insert no ) 4947(a)(1) or 527 J Website: ▶ YOUTHGARDENPROJECT.ORG H(c) Group exemption number ▶ X Corporation K Form of organization Other > L Year of formation M State of legal domicile Summary Briefly describe the organization's mission or most significant activities. AGRICULTURAL EDUCATION Activities & Governance If the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box ▶ Number of voting members of the governing body (Part VI, line 1a)....... Number of independent voting members of the governing body (Part VI, line 1b). 7 5 28 Total number of volunteers (estimate if necessary) . . . . . . . 6 Total gross unrelated business revenue from Part VIII, column (C), line 12. . . 0 7a Net unrelated business taxable income from Form 990-T, line 34. **Current Year** Contributions and grants (Part VIII, line 1h). . . 171.929 200.061 Program service revenue (Part VIII, line 2g) . . . . . 38,662 9 42,226 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . 34.713 31.599 12 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12). 245.304 273,886 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . . . 0 14 0 0 15 188.843 220,805 16a 17 61,146 70,440 18 249,989 291,245 Revenue less expenses. Subtracilité 18 from line 19 -4.685-17.359 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16). . 177,594 160,084 21 Total liabilities (Part X, line 26) . . . . . 3,778 3,627 Net assets or fund balances. Subtract line 21 from line 20 173.816 156.457 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 complate-Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of of Here Type or print name and title Date Check if Preparer's identifying number Preparer's Paid signature self-(see instructions) ▶ X 12/6/2010 employed 🗘 Preparer's Firm's name (or yours EIN **Use Only** if self-employed), 245 WILLIAMS WAY, MOAB, UT 84532 Phone no ► (435) 259-7022 address, and ZIP + 4 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . . No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

(HTA)

;	(Code: ) (Expen	ses \$0				0)	
				<del>-</del>			
_		<del></del>					
ı	Other program services. (Descri	ibe in Schedule O.)					
	(Expenses \$	0 including grants of	f \$	0)(Revenue \$	C	))	
,	Total program service expens	es 🕨	218,480				
						Form <b>990</b> (20	09)
						·	

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Χ	
3	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	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice			
	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		l
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	├ <del>Ŭ</del>		<del>  ^</del>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	<b>-</b>		<u> </u>
O	complete Schedule D, Part III	8		х
•	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	-		<u> </u>
9	<del>y</del>			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	_		
40	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	ا ا		
	VII, VIII, IX, or X as applicable	11	X	J 635
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			132
	Schedule D, Part VI.		SUPPLY TO	* 658.
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			٠٠
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	A pro- Principle	*	200
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			<b>4.</b> 7.4
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			<b>#</b>
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			**
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			7
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax  Yes No			T Sam
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			1
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

### Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . . . . Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . Χ 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 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 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or Χ 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Х disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? 27 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): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . Χ 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M... Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Х 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х 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, Part 37 Χ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. . . . . . . . .

statements Regarding Other IRS Fillings and Tax Compiliance  1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.  b Enter the number of Forms W-25 included in Ine 1a. Enter -0- if not applicable.  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamthing) winnings to prize winners?  2 Enter the number of from yobes 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.  Satements, filed for the calendar year ending with or within the year covered by this return.  Satements, filed for the calendar year ending with or within the year covered by this return.  Satements, filed for the calendar year ending with or within the year covered by this return.  Satements, filed for the calendar year ending with or within the year covered by this return?  b If Yes, * has it filed a Form 990-T for this year? If Ye, * provide an explanation in Schedule O.  3 Dot the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If Yes, * enter the name of the foreign country (such as a bank account, securities account, or other financial account)?  b If Yes, * enter the name of the foreign country: ▶  Sae the instructions for exceptions and filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts.  3 Was the organization and party to a prohibited tax shelter transaction?  c If Yes's to line 5 aor 55, did the organization that it was or is a party to a prohibited tax shelter Fransaction?  c If Yes's to line 5 aor 55, did the organization tile Form 8889 f. Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  c If Yes's to line 5 aor 55, did the organization in let were not tax deductible?  b If Yes, * did the organization include with exercise statement that such contributions or	Form 99		7-056 <u>8</u> 051	Р	age 5
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0.  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 account)?  5b If "Yes," enter the name of the foreign country."  5ce the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization ap anty to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization appears to that it was or is a party to a prohibited tax shelter transaction?  5b If "Yes," bill for this party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6a X  7b Organizations shat may receive deductible contributions under section 170(c).  8b If "Yes," did the organization notify the donor of the value of the goods or services provided?  8c Did the organization of the payor?  9c Did the organization of the payor?  9c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  9c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  9c Did the organization of qualified intellectual property, did the organization flave and party as a contribution and party for your payoranizations. Enter:  10c Did the organization make a distribution or advised funds and section 509(a)(3) supporting organizations. Enter:	h				
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Dut the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.  3a X  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 account)?  5b If "Yes," enter the name of the foreign country: ►  5ee the instructions for exceptions and filing requirements for Form TD F 90-22.1, 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?  5a X  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shear was not tax deductible?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible to entributions under section 170(c).  6b If "Yes," did the organization on the value of the goods or services provided?  7b If "Yes," did the organization of St Sed gift during the year  6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c If Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c If Did the organization, during the year, receive any funds, directly or indirectly, to pay pre			***		. 2.1
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a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year.  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  F Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  B Did the organization make a distribution to a donor, donor advisor, or related person?  Did the organizations can be a distribution to a donor advisor, or related person?  B Coross receipts, included on Form 990, Part VIII, line 12.  Gross income from members or shareholders.  Cross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).  Cross income from other sources (Do not net amounts due or paid to other sources against amounts of tax-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	7			1770	200
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required to file Form 8282?.  d if "Yes," indicate the number of Forms 8282 filed during the year.  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 Did the organization of qualified intellectual property, did the organization file Form 8899 as required?  7 Did the organizations of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12.  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  10b  11a  Bection 501(c)(12) organizations. Enter:  a Gross income from members or shareholders.  11b  11c  11d  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a  12b  12b  12c  12a	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
d if "Yes," indicate the number of Forms 8282 filed during the year	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
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h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12.  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  10a  10b  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  12b				-	
required?		· · · · · · · · · · · · · · · · · · ·	/9		
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organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	·	(3-1-1-1)	LY S	1 10
organization, have excess business holdings at any time during the year?	•				Z * 5°
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?			8		
a Did the organization make any taxable distributions under section 4966?	9		1.78	70.	
10 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12			. 9a	1-20000000	∞
a Initiation fees and capital contributions included on Part VIII, line 12	b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10	Section 501(c)(7) organizations. Enter:	3	* *	
11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders	а	· · · · · · · · · · · · · · · · · · ·			
a Gross income from members or shareholders	þ				ŊŦ.
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11				Ä
against amounts due or received from them.)				*#* . * V	S. 3.4
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	b		ĝ.	<b>*</b> 22	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	40:		43-	شنث	<b></b>
b in 100; office the amount of tax exempt interest received of about a during the year.					(}(y-11)#
	<u>D</u>	in rest, enter the amount of tax-exempt interest received of accrued during the year   120	U. G.A. MODERNESS	000	(2000)

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

Sect	ion A. Governing Body and Management				1	
1a	Enter the number of voting members of the governing body	مها	1	7	Yes	No
b	Enter the number of voting members of the governing body	1a		_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	1b	hin with			-
~	any other officer, director, trustee, or key employee?					- V
3	Did the organization delegate control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily performed by or the control over management duties customarily dut			2	<del>                                     </del>	X
•	supervision of officers, directors or trustees, or key employees to a management company o					
4				3	-	X
4	Did the organization make any significant changes to its organizational documents since the prior Form			4	<del> </del>	X
5	Did the organization become aware during the year of a material diversion of the organization boes the organization have members or stockholders?			5		X
6 7a				6		X
1 a	Does the organization have members, stockholders, or other persons who may elect one or of the governing body?					"
b	Are any decisions of the governing body subject to approval by members, stockholders, or o				-	X
8	Did the organization contemporaneously document the meetings held or written actions under			7b	3840	3570
0	the year by the following:	епаке	n auring		196	
2				9-7	- A	MAX.
a b	The governing body?			8a	X	├
9	Let here any efficer director triptee or key employee listed in Bod VIII. Section A who exceed			8b	X	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the property of the propert					
Saat	at the organization's mailing address? If "Yes," provide the names and addresses in Scheduling R. Policies (This Section Progression for the section f			9a	L	X
	ion B. Policies (This Section B requests information about policies not required by the enue Code.)	e inte	ernai			
11000	filde Gode.)			····	Yes	T
102	Does the organization have local chapters, branches, or affiliates?			400	res	No X
b	If "Yes," does the organization have written policies and procedures governing the activities	محسم		. 10a		<del>  ^</del>
D	affiliates, and branches to ensure their operations are consistent with those of the organization			406		
11	Has the organization provided a copy of this Form 990 to all members of its governing body			10b		-
• • •	form?		•	.   11	X	1
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990					1777
12a					Х	2000
b	Are officers, directors or trustees, and key employees required to disclose annually interests			128	<del>  ^</del>	_
D	rise to conflicts?		•	426	l	
С	Does the organization regularly and consistently monitor and enforce compliance with the po			12b	X	
·	describe in Schedule O how this is done			12c	x	
13	Does the organization have a written whistleblower policy?				<del>  ^</del>	X
14	Does the organization have a written document retention and destruction policy?				X	<del>  ^</del>
15	Did the process for determining compensation of the following persons include a review and			74	^	200
13	independent persons, comparability data, and contemporaneous substantiation of the delibe	• •	•			
а	The organization's CEO, Executive Director, or top management official.			- Anna Company	X	
b	Other officers or key employees of the organization				x	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar			講	200	
IVa	with a taxable entity during the year?	_		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization			- 100		<b>5</b> 4-12:
	its participation in joint venture arrangements under applicable federal tax law, and taken ste					
	the organization's exempt status with respect to such arrangements?			. 16b	and a service	200
Sect	ion C. Disclosure	• • •	<u> </u>	.   100		<u></u>
<u>360.</u> 17						
17 18	List the states with which a copy of this Form 990 is required to be filed ► UT  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 900	)_T (501/6)/2)	e only)		
	available for public inspection. Indicate how you make these available. Check all that apply.	แน ฮฮ(	J-1 (JU1(U)(J);	orny)		
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents of the control	mente	conflict of inte	erest		
	policy, and financial statements available to the public.	iiGiilə	, commet or me	CIGGE		
20	State the name, physical address, and telephone number of the person who possesses the t	nnke	and records o	f the		
	organization: ► YOUTH GARDEN PROJECT  530 S. 400 E., MOAB, UT 84532		700-203-2			
	JJU J. TVV L., IVIJAD, U I 04032					

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

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. Use Schedule J-2 if additional space is needed.

- 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. 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.

Check this box if the organization did not compe		ent on	rice			tor, o	r tri			
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee	Institutional trustee	Officer		유 Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
JEN SADOFF DIRECTOR	40.				x	×		36,677	0	0
ANNE ERICKSON PRESIDENT	2.							0	0	0
TERRY SHEPHERD V.P	2.							0	0	0
JEN OESTREICH TREASURER	2.							0	0	0
MIKE DEHOFF SECRETARY	2.							0	0	0
MEGAN MACOMBER BOARD	2.							0	0	0
LINDA WHITHAM BOARD	2.							0	0	0
JERRY SHUE BOARD	2							0	0	0
CONNIE MASSINGALE BOARD	2.							0	0	0
						ï				
					П	-				

Pa	rt VII · Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	ees.	anc	Hig	hes	t Co	mpensated Em	ployees (cor	tinued)	
	(A)	(B)	(C)						(D)	(E)	(1	<sup>=</sup> )
	Name and title	Average hours per week			(chec	,	emp		Reportable compensation from	Reportable compensation from related	n amoi oth	nated unt of ner
			Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ner	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	C) from organi and re	zation
							-					
										,		
	~			_								
<u>1b</u>	Total	<u>, , , , , , , , , , , , , , , , , , , </u>		<u> </u>				<u> </u>	36,677		0	0
2	Total number of individuals (including but no reportable compensation from the organizat		e lis	ted a	bove 0	e) wł	no re	ceive	ed more than \$1	00,000 in		
3	Did the organization list any former officer,										Yes	
4	employee on line 1a? If "Yes," complete Sci For any individual listed on line 1a, is the su									1	3	X
•	the organization and related organizations g	reater than \$15	0,00	0? If							4	X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Yo	•				•			•		5	X
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest concompensation from the organization.	npensated indep	pend	ent d	contr	acto	rs tha	at re	ceived more tha	n \$100,000 c	of	
	(A) Name and business a	ddress							(B) Description of serv	rices	(C) Compensation	1
								-			<del></del>	0
-	<del></del>									<del>                                     </del>		0
												0
2	Total number of independent contractors (in			ed to	thos	se lis	ted a	abov	e) who received			0
	more than \$100,000 in compensation from t	he organization	▶				0					

Form 99					87-0568051 P							
Part	VIII	Statement of Revenue										
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514			
gifts, grants Iar amounts	1a	Federated campaigns		1a	0	,						
gra our	b	Membership dues		1b	0							
s, ç	С	Fundraising events		1c	0							
gift ar	d	Related organizations		1d	0		₹.*	,				
B.S.	е	Government grants (contributions)		1e	114,748		19. v	<b>.</b> 3 '				
ior r si	f	All other contributions, gifts, grants			!		white it	gi 'è -				
but the		similar amounts not included above		1f	85,313			Ž.	i :			
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in I			0		*	3				
S E	h	Total. Add lines 1a-1f				200,061	*	ζ.				
					Business Code	200,001						
eun	2a	PROGRAM USER FEES			111000	42,226						
Se.	Ь			٠ .	111000	0			<del></del>			
9	C					0			<del>-</del>			
Ē	4			•		0		<u></u> -				
Š	•			.		0						
gra	•	All other program service revenue		•		0						
Program Service Revenue	a											
		Total. Add lines 2a–2f				42,226	, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	7 49° \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	*			
	3	Investment income (including divide										
	_	other similar amounts)				. 0						
	4	Income from investment of tax-exe				0						
	5	Royalties	<u> </u>	· · ·		0	***************************************	M* V				
	_	_	(ı) Real		(II) Personal			5 75 ·				
	6a	Gross Rents		355			* (************************************	*				
	b	Less: rental expenses			,,_			i Ž				
	С	Rental income or (loss)		355				*				
	d	Net rental income or (loss)		1	<u> Þ</u>	355						
	7a	Gross amount from sales of	(ı) Securitie		(II) Other		, ww. f	Nec				
		assets other than inventory		0	0		· 4, 4. *	<b>4</b> .				
	b	Less: cost or other basis					·	N. C.				
		and sales expenses		0		Ş	·		- Special Control of the Control of			
	С	Gain or (loss)		0			3 - 47	C. W. Z				
	d	Net gain or (loss)		٠.,	<u></u> ▶	. 0						
Ð	8a	Gross income from fundraising							1			
Other Revenue	i)	events (not including \$	0				7 4 400 °					
Š		of contributions reported on line 1c					á karal -	,	1			
æ		See Part IV, line 18		а	44,187		7.2.		,			
Je.		Less: direct expenses		b	12,943		····	<u>*</u>				
ᅗ		Net income or (loss) from fundraising	-		<u> &gt;</u>	31,244						
	9a	Gross income from gaming activitie				*		•				
		See Part IV, line 19		а	0		•					
	b	Less: direct expenses		b	0		` `	,				
	С	Net income or (loss) from gaming a	ctivities			0						
	10a	Gross sales of inventory, less					X* + U - 1/2	<b>3</b>				
		returns and allowances		a	0	•						
	b	Less: cost of goods sold		ь	0			. <u>š</u> ,				
	C	Net income or (loss) from sales of i	nventory			0						
		Miscellaneous Revenue			Business Code		· · · · · · · · · · · · · · · · · · ·	****				
	11a			$\Box$		0						
	b					0						
	С					0						
	d	All other revenue				0						
	е	Total. Add lines 11a-11d				0						
	12	Total revenue. See instructions	<u></u>			273,886	0		0			

Form **990** (2009)

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column	(A) but are not re	quired to complete	columns (B), (C), a	and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				4 Charles 1 Sec. 344
	organizations in the U.S. See Part IV, line 21	0		<b>militari</b> di <b>mi</b> nistra di Co	' *** ", ' . ·
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0		CONTROL OF THE PARTY OF THE PAR	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				/ Y- \$ }
	U.S. See Part IV, lines 15 and 16	0	<del></del>	f, ~	·
4	Benefits paid to or for members	0		. ** - û.; · · · · · · · · · · · · · · · · · · ·	
5	Compensation of current officers, directors,				
_	trustees, and key employees	36,677	18,793	9,045	8,839
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	_			
_	persons described in section 4958(c)(3)(B)	0			<del></del>
7	Other salaries and wages	153,676	139,832	6,348	7,496
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	0			
9	Other employee benefits	14,508			8,111
10	Payroll taxes	15,944		15,944	
11	Fees for services (non-employees):				
а	Management	4,433	<del></del>		
b	Legal	0			
С	Accounting	481		481	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0	1		
g	Other	3,831			****
12	Advertising and promotion	10,142			
13	Office expenses	782	782		
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	168	168		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	9,857		9,857	0
23	Insurance	2,461	2,461		restant to the second s
24	Other expenses. Itemize expenses not	The second secon			
	covered above. (Expenses grouped together				Committee &
	and labeled miscellaneous may not exceed	The second second	rpakku kas		
	5% of total expenses shown on line 25 below.)	Maring of Single			
а	LICENSING	197		197	<del></del>
b	BANK CHARGES	50		50	
C	AUTO	1,579			
d	SUPPLIES	19,256			
e	REPAIRS & MAINTENANCE	9,887			
	All other expenses PHONE & UTILITIES	7,316			01.115
<u>25</u>	Total functional expenses. Add lines 1 through 24f	291,245	218,480	41,922	24,446
26	Joint costs. Check here ▶ if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising				
	solicitation		L		
				-	Form 990 (2000)

	990 (20		<del></del>		87-0366031	Page
Pa	art X	Balance Sheet			<del>,</del>	
			(A) Beginning of year		(B) End of ye	ear
	1	Cash—non-interest-bearing	36,189	1		26,277
	2	Savings and temporary cash investments	14,609	2		14,609
	3	Pledges and grants receivable, net	0	3		
	4	Accounts receivable, net	0	4		
	5	Receivables from current and former officers, directors, trustees, key	- Principle of Money			
		employees, and highest compensated employees. Complete Part II of				
		Schedule L	0	5		
	6	Receivables from other disqualified persons (as defined under section		1.204.00	0.61 - 1.000	y . 7
	_	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete				
		Part II of Schedule L	0	6		
ţ	7	Notes and loans receivable, net	0	7		
Assets	8	Inventories for sale or use	Ŭ	8		<u>-</u>
As	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or 10a 173,195		~ a.6	200 178 188 2 C	·
		other basis. Complete Part VI of Schedule D	C. Salan Alaka		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 2 4 2
	b	Less: accumulated depreciation 10b 53,997	126,796	10c	200	119,198
	11	Investments—publicly traded securities	120,730	11		113,130
	12	Investments—other securities. See Part IV, line 11	0	12		0
	13	Investments—program-related. See Part IV, line 11	0	13		0
	14	Intangible assets	0	14		0
	15	Other assets. See Part IV, line 11	0	15		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	177,594	16		160,084
	17	Accounts payable and accrued expenses	3,778	17	<del>                                     </del>	3,627
	18	Grants payable	5,770	18		5,021
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	0	20		
Ś	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
Liabilities	22	Payables to current and former officers, directors, trustees, key		H.25%	1841 / TV	•
Ē		employees, highest compensated employees, and disqualified		121.4		,
Lia		persons. Complete Part II of Schedule L	0	22	7 X19/2 3828 4	<del>-,-,-</del>
	23	Secured mortgages and notes payable to unrelated third parties	0	23	·	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24		0
	25	Other liabilities. Complete Part X of Schedule D	0	25		0
	26	Total liabilities. Add lines 17 through 25	3,778	26		3,627
	20		3,770	20 4. e		3,02 <i>1</i>
Ś		Organizations that follow SFAS 117, check here ► X and		3.0		
ည		complete lines 27 through 29, and lines 33 and 34.			• *	<del></del>
<u>la</u>	27	Unrestricted net assets	159,207	27		141,848
ä	28	Temporarily restricted net assets	14,609			14,609
<u>n</u>	29	Permanently restricted net assets		29		
Ī		Organizations that do not follow SFAS 117, check here ▶				,
ō		and complete lines 30 through 34.				*** <b>*</b>
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30		
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
t A	32	Retained earnings, endowment, accumulated income, or other funds.		32	<del></del>	
Se	33	Total net assets or fund balances	173,816			156,457
	34	Total liabilities and net assets/fund balances	177,594			160,084
	<u></u>	rota, nobilitios directios desocionana balances	177,354	<u> </u>	l	.00,004

01111	30 (2003) TOOTH GARDEN PROJECT	1 600000-10		rage I.Z
Part	XI Financial Statements and Reporting			
	<u> </u>		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	***************************************	- i	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			ioni:
	Schedule O.	-	******	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		Х
b	Were the organization's financial statements audited by an independent accountant?	. 2b		Х
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. 2c	L	
	If the organization changed either its oversight process or selection process during the tax year, explain in	Service .	6.1	,
	Schedule O		E .	· > · .
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	2	200	*
	issued on a consolidated basis, separate basis, or both:		ş ·	<u></u>
	Separate basis Consolidated basis Both consolidated and separate basis			
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		Х
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 steps taken to undergo such audits.	3b		

Form **990** (2009)

### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury

**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.

► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

▶ Attach to Form 990 or Form 990-EZ. Internal Revenue Service Name of the organization Employer identification number YOUTH GARDEN PROJECT 87-0568051 Reason for Public Charity Status (All organizations must complete this part.) See instructions.

				iditiy Oldiad (7 iii o.)	90111201101	10 11100	30p.0.c	,o pa.	<del>1.7 0 0 0 1.</del>	1011 00110			
he o	orgai		•	ation because it is (Fo		-		-					
1	닏			rches, or association of			ed in <b>sec</b>	tion 170(	(b)(1)(A)(i	).			
2	Щ	A school des	scribed in <b>sectio</b>	on 170(b)(1)(A)(ii). (At	tach Sche	dule E.)							
3	Ш	A hospital or	a cooperative h	nospital service organi	zation des	scribed in	section '	170(b)(1)	(A)(iii).				
4			search organiza me, city, and sta	ation operated in conju ate:	inction wit	h a hospi	tal descrii	bed in <b>se</b>	ction 170	(b)(1)(A)	(iii). En	ter the	
5				r the benefit of a collec (Complete Part II.)	ge or unive	ersity own	ed or ope	erated by	a governi	mental ur	nit desci	ribed	
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit de	escribed i	n section	170(b)(1	1)(A)(v).				
7	X	_		y receives a substanti (1)(A)(vi). (Complete l	•	ts suppor	t from a g	jovernme	ental unit o	or from th	e gener	al publi	ic
8		A community	trust described	in section 170(b)(1)	(A)(vi). (C	omplete F	Part II.)						
9		receipts from support from	n activities relate gross investme	y receives: (1) more the d to its exempt function in the income and unrelated after June 30, 1975.	ons—subjeted busine	ect to cert ess taxabl	tain exce <sub>l</sub> e income	ptions, an (less sec	nd (2) no r ction 511 t	nore thar	33 1/3	% of it	
10		An organizat	tion organized a	nd operated exclusive	ly to test f	or public	safety. Se	ee sectio	n 509(a)(	4).			
e f g		purposes of 509(a)(3). Cla Type By checking persons other 509(a)(1) or If the organization Since Augus following per (i) A person and (ii) A famili (iii) A 35% Provide the fee of supported	this box, I certifer than foundations section 509(a)(2) attor received a check this box at 17, 2006, has resons?  Son who directly it below, the government of a controlled entite the controlled entitled entite the controlled entitled	a written determination	izations di f supporti Type is not con ir than one in from the  pted any g either alor pported on ) above? . ed in (i) or	escribed in gorgani III-Function or more  IRS that	n section zation an tionally ir rectly or i publicly set is a Type tribution for their with an?	509(a)(1 d comple ategrated indirectly supported be I, Type from any persons of	by one or d organization of the described (vi)	on 509(a)  1e throug  d	(2). See th 11h.  Type III- squalifies cribed if the coording the coordinates the coordinate	section Other	on No
		anization	(,	(described on lines 1–9 above or IRC section	governing of		_	nization in of your		tion in col ized in the		support	
				(see instructions))	, , ,		supp	ort?		S?	-		
			<del> </del>		Yes	No	Yes	No	Yes	No	<del> </del>		
										<u></u>			0
													0
													0
		<u>-</u> .							_				0
													0
Γota	.I												0

Schedule A (Form 990 or 990-EZ) 2009 YOUTH GARDEN PROJECT 87-0568051 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (e) 2009 Calendar year (or fiscal year beginning in) ▶ (a) 2005 (c) 2007 (d) 2008 (f) Total **(b)** 2006 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . . 184,093 199,839 222,825 210,591 242,287 1.059,635 Tax revenues levied for the organization's benefit and either paid to or expended on ıts behalf . . . . . . . . . . . . . . . . n 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . 0 Total. Add lines 1 through 3 . . . . . 184,093 199,839 1,059,635 222.825 210,591 242,287 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . Public support. Subtract line 5 from line 4 1,059,635 Section B. Total Support **(b)** 2006 Calendar year (or fiscal year beginning in) ▶ (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4. . 184,093 199,839 222,825 210,591 242,287 1,059,635 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 37 28 65 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . . 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . . . <u>6,8</u>59 1.861 34,713 31.650 106,392 Total support. Add lines 7 through 10 . . . 11 1,166,092 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . . . 90.87% 15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . . 15 93 34% 16a 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

	and <b>stop here</b> . The organization qualifies as a publicly supported organization	<
b	33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this_	
	box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<

10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. .

10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. 18

	100111 0/1101					01-00000	rage J
Par				ion 509(a)(2)			
Soci	(Complete only if you checked to A. Public Support	the box on line	9 of Part I.)				
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(a) 2000	(f) Total
		(a) 2003	(b) 2000	(6) 2007	(a) 2006	(e) 2009	(i) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	ا	0			ĺ	0
2	· · · · · ·	Ť.		.,			
_	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished	1					
	in any activity that is related to the						
	organization's tax-exempt purpose	o	0				0
3	Gross receipts from activities that are not an						
4	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on					i	
	its behalf	ا ا	0				0
5	The value of services or facilities						<u>~</u>
	furnished by a governmental unit to the						
•	organization without charge	0	0	<u> </u>			0
6	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3	0	0	0	0	0	0
<i>i</i> a	received from disqualified persons						0
	·						0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from	- 16X-		****	K	Marchael Springer	
	line 6.)						0
	tion B. Total Support	<del> </del>	<del></del>			· · · · · · · · · · · · · · · · · · ·	
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	0	0	0	0	o	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
C	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on		•				0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV)	0	0				0
13	<b>Total support</b> . (Add lines 9, 10c, 11, and 12.)	ا	0	0	0	اه	0
14	First five years. If the Form 990 is for the or						
•	organization, check this box and <b>stop here</b> .	•			-		
Sec	tion C. Computation of Public Support						<u>_</u>
15	Public support percentage for 2009 (line 8, c		d by line 13. co	olumn (fl)		15	0.00%
16	Public support percentage from 2008 Sched	, ,	-			16	0.00%
Sec	tion D. Computation of Investment Inc						
17	Investment income percentage for 2009 (line			e 13, column (	f))	17	0.00%
18	Investment income percentage from 2008 So	chedule A, Part	III, line 17			18	0.00%
19a							
	not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization						
b	33 1/3% support tests-2008. If the organization of						▶ □
20	line 18 is not more than 33 1/3%, check this box a						, · · 【片
20	Private foundation. If the organization did n	IOL CHECK & DOX	on iine 14, 198	a, or 190, cneci	k una box and :	อออ แกลแนบแบท <b>ง</b>	, <b>-</b> []

	n 990 or 990-EZ) 2009	YOUTH GAR	<u>IDEN PROJE</u>	CT			8	7-0568051	Page 4
Part IV	Supplemental	Information.	Complete th	is part to pro	ovide the ex	planations r	required by	Part II, line	10;
	Part II, line 17a	or 17b; and F	Part III, line 1	2. Provide a	nv other ad	ditional infor	mation. Se	e instruction	ns.
					,			, , , , , , , , , , , , , , , , , , ,	-
				•••••					
								- <b></b>	
				••••					
	·								
									•
									• • • • • • • • • • • • • • • • • • •
·									

### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990. ► See separate instructions. Inspection

	o. g		Employer identification number							
	TH GARDEN PROJECT		87-0568051							
Part	Organizations Maintaining Done	or Advised Funds or Other Similar Fu	unds or Accounts. Complete if							
	the organization answered "Yes" to Form 990, Part IV, line 6.									
		(a) Donor advised funds	(b) Funds and other accounts							
1	Total number at end of year									
2	Aggregate contributions to (during year)									
3	Aggregate grants from (during year)									
4	Aggregate value at end of year									
5	· ·		15-1							
3	Did the organization inform all donors and d									
_	funds are the organization's property, subje									
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be									
	used only for charitable purposes and not for									
	purpose conferring impermissible private be	enefit?	Yes No							
Part		plete if the organization answered "Yes"								
1	Purpose(s) of conservation easements held									
•			of an historically invariant land and							
	Preservation of land for public use (e.g.	·	of an historically important land area							
	Protection of natural habitat	Preservation	of a certified historic structure							
	Preservation of open space									
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribut	tion in the form of a conservation							
	easement on the last day of the tax year.	and the second s								
	in the second of the tan your		Held at the End of the Tax Year							
а	Total number of conservation easements .									
a b	Total acreage restricted by conservation ea									
C	Number of conservation easements on a ce		. 2c							
d	Number of conservation easements include									
3	Number of conservation easements modifie	d, transferred, released, extinguished, or te	erminated by the organization							
_	during the tax year									
4	Number of states where property subject to	-								
5	Does the organization have a written policy									
	violations, and enforcement of the conserva									
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservation	n easements during the year							
	<b>&gt;</b>									
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements during the year							
	▶ \$		ů ,							
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	s of section							
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?									
9	In Part XIV, describe how the organization r									
-	balance sheet, and include, if applicable, the	•	**							
	the organization's accounting for conservati		nanda datomono nat accomoc							
Part		ons of Art, Historical Treasures, or Other	r Similar Assets							
	Complete if the organization answere									
10		<del> </del>	totomant and halance sheet works of							
ıa	If the organization elected, as permitted und art, historical treasures, or other similar assi									
	service, provide, in Part XIV, the text of the									
b	If the organization elected, as permitted und									
IJ	historical treasures, or other similar assets i									
	service, provide the following amounts relati		aren in furtherance of public							
			▶ ₾							
	<ul><li>(i) Revenues included in Form 990, Part VII</li><li>(ii) Assets included in Form 990, Part X</li></ul>	ı, iine 1								
_	(ii) Assets included in Form 990, Part X.		· · · · · · · · · · · · · · · · · · ·							
2	If the organization received or held works of		sets for financial gain, provide the							
	following amounts required to be reported u									
а	Revenues included in Form 990, Part VIII, li									
b	Assets included in Form 990, Part X		<b>▶</b> \$							

Part		<u>Organizations Maintaining</u>	g Collections	of Art	t, Hist	orical 1	<u> reasures, </u>	<u>or Otł</u>	<u>ner Similar Ass</u>	sets (c	<u>ontinu</u>	<u>ıed)                                    </u>
3		g the organization's acquisition of its collection items (check all		d othe	r recor	ds, ched	ck any of the	follow	ing that are a sig	nificant	t	
а		Public exhibition		d		Loan	or exchange	progra	ams			
b		Scholarly research		е		Other						
С	同	Preservation for future genera	ations		_							
4		Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.										
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No											
Part	rt IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part											
	ر ملاء ما	IV, line 9, or reported an ar										
1a b	ınclu	e organization an agent, trustee ded on Form 990, Part X? es," explain the arrangement in								Y	es 🗌	No
-		or, empress are arrangement in	· areyare area	op.o.			, tabio.		A	mount		
С	Begi	nning balance						. 1c				0
d	Addi	tions during the year						. 1d				
е	Distr	ibutions during the year						. 1e				
f	Endi	ng balance						. 1f				0
2a	Did t	he organization include an amo	ount on Form 9	90, Pai	rt X, lir	ne 21?.				$\prod Y$	es X	No
b		es," explain the arrangement in		•	•							
Part		<b>Endowment Funds.</b> Com		janiza	tion a	nswere	d "Yes" to F	orm 9	90, Part IV, lin	e 10.		
			(a) Current year	-	(b) Pno		(c) Two years		(d) Three years back	1	ur years	back
1a	Begi	nning of year balance		0					<u> </u>	* )		, 1
b	Cont	ributions						25,225	<b>3</b> 234 ~ 14~ 55 1 % 7 %	14 3	: 	
С	Net i	nvestment earnings, gains,					acceptant Approximate in		and the second s			
	and	losses										
ď	Gran	nts or scholarships								r Poly Si	Ä.	
е	Othe	er expenditures for facilities					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	3, 22			, , , , , , , , , , , , , , , , , , ,	
		programs						i hiji		\$ - '~ · \$ \	. 100	' ¹ ``
f	Adm	inistrative expenses						2.72.4				
g	End	of year balance		0		0						<u>. '</u>
2	Prov	ide the estimated percentage o	f the year end l	palanc	e held	as:						
а	Boar	d designated or quasi-endowm	ent 🕨		%							
b		nanent endowment	<u>%</u>									
C		n endowment	<u>%</u>									
3a		there endowment funds not in t	ne possession	of the	organi	zation th	at are held a	and adı	ministered for the	e ,		
	_	nization by:									Yes	No
	(i)	unrelated organizations								3a(i)		<u> </u>
	(ii)	related organizations								3a(ii)		
b		es" to 3a(ii), are the related orga			•					3b		
4		cribe in Part XIV the intended u						4 V 1	40			
Part	VI _	Investments—Land, Buil					T T		T -			
		Description of investment	(a) Cost o	stment)	asis		st or other s (other)	de	Accumulated epreciation	(d) Bo	ook value	e 
1a	Land	1			0		0					0
b	Build	dings			0		163,291		47,078		110	6,213
С	Leas	sehold improvements			0		0		0			0
d	-	pment			0		9,904		6,919		:	2,985
<u>e</u>	Othe				0		0		0			0
Tota	I. Add	lines 1a through 1e. (Column (	'd) must equal l	=orm 9	90, Pa	art X, col	lumn (B), line	∋ 10(c).	.) . <u>.</u> 🕨		119	9,198

\$chedule D (Form 990) 2009

Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives	(	
Closely-held equity interests		)
Other		
	<del></del>	
***************************************		)
Total (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Relate	ed. See Form 990, Part X	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		0
· · · · · · · · · · · · · · · · · · ·		
	<del></del>	
		)
	(	
<u></u>	(	)
	<del></del>	
Part IX Other Assets. See Form 990,		
Other Assets. See Form 990,	(a) Description	(b) Book value
,	(4) 2000.171.017	0
		0
		0
~	4	0
		0
		0
<del></del>		0
		0
		0
Total. (Column (b) must equal Form 990, Part X,		
Part X Other Liabilities. See Form 99	0, Part X, line 25.	
1. (a) Description of liability	(b) Amount	
Federal income taxes		
	<del> </del>	
	<del>                                     </del>	
		0 50
		0
Total (Column (b) must equal Form 990, Part X, col (B) line 25)		
2. FIN 48 Footnote. In Part XIV, provide the text organization's liability for uncertain tax positions		zation's financial statements that reports the
organization a nability for uncertain tax positions	UIIUCI FIN 40	

Sched	dule D (Form 990) 2009		Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financia	l Statemen	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	273,886
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	291,245
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-17,359
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	17,359
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		<u> </u>
1	Total revenue, gains, and other support per audited financial statements	¥ v.	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)	44	
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	N. S.	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
_C	Add lines 4a and 4b	. 4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		0
	Reconciliation of Expenses per Audited Financial Statements With Expense	<u>es per Retı</u>	ırn
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	<b>4.5</b>	
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XiV.)	2	•
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		•
C	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	0
Com	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and part to provide any additional information.	4b. Also cor	

# YOUTH GARDEN PROJECT 87-0568051 Schedule D (Form 990) 2009 Page 5 Supplemental Information (continued)

### **SCHEDULE O** .(Form 990)

## Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990.

YOUTH GARDEN PROJECT 87-0568051 Form 990 Part VI Section B Line 11A AFTER THE 990 IS PREPARED BY A CPA IT IS REVIEWED BY KEY STAFF AND THE BOARD OF DIRECTORS. Form 990 Part VI Section C Line 19 ALL DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

# Form . 4562

Depreciation and Amortization

### (Including Information on Listed Property)

OMB No 1545-0172 2009 Attachment

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

Attach to your tax return.

Sequence No 67

YOUTH GARDEN PROJECT	1990	vity to which this to	orm relates		87-0568051	ber	
Part I Election To Expense Cer		ler Section 17	'α		107-0000001		
Note: If you have any listed propert	•						
						1	250,000
Maximum amount. See the instructions for a higher limit for certain businesses							
3 Threshold cost of section 179 property						3	2,259 800,000
4 Reduction in limitation. Subtract line 3							000,000
5 Dollar limitation for tax year Subtract						┝┻	
				•		. 5	250,000
6 (a) Description of prope			t (business use		(c) Elected co		230,000
(a) Description of prope	orty	(6) 003	t (Dusiness use	5 Offig)	(c) Liected co	,31	
							A C
7 Listed property. Enter the amount from	n line 29			7			
8 Total elected cost of section 179 prope						8	0
9 Tentative deduction. Enter the smalle	r of line 5 or line 8	001411117 (0), 11110	o o una r .				0
10 Carryover of disallowed deduction from						10	ı
11 Business income limitation. Enter the s						11	
12 Section 179 expense deduction. Add						12	0
13 Carryover of disallowed deduction to 2							
Note: Do not use Part II or Part III below for					<u> </u>		
Part II Special Depreciation Allo				clude listed p	roperty.) (See	instru	uctions.)
14 Special depreciation allowance for qua							,
during the tax year (see instructions).						14	
15 Property subject to section 168(f)(1) el						15	
16 Other depreciation (including ACRS).						16	
Part III MACRS Depreciation (Do	not include listed	property.) (Se	e instruction	s.)			
		Section A		•			
17 MACRS deductions for assets placed i	in service in tax year	s beginning befo	ore 2009			17	9,534
18 If you are electing to group any assets	placed in service du	ring the tax year	rinto one or r	nore		2000	
general asset accounts, check here .					▶ 🔲	1 (300)	
Section B - Assets Place					reciation Syste	m	
	(b) Month and	(c) Basis for	(d) Recovery		(f)	1	(g)
(a) Classification of property	year placed	depreciation	period	Convention	Method	Depre	eciation deduction
, , , , , , , , , , , , , , , , , , , ,	in service	(business/investment)	i .			'	
19 a 3-year property							
<b>b</b> 5-year property	The state of the s						
c 7-year property		2,259	7	HY	200DB		323
d 10-year property							
e 15-year property							
f 20-year property							
g 25-year property		<del>-</del> :	25 yrs.		S/L		
h Residential rental			27.5 yrs.	ММ	S/L		
property			27.5 yrs.	MM	S/L		
i Nonresidential real			39 yrs.	MM_	S/L		
property				MM	S/L		
Section C - Assets Place			Using the Al	ternative Dep	preciation Syste	<u>m</u>	
20 a Class life					S/L	<u> </u>	
<b>b</b> 12-year			12 yrs.		S/L	<u> </u>	
c 40-year		<u> </u>	40 yrs.	MM	S/L		
Part IV Summary (See instruction						<del>, ,</del>	
21 Listed property. Enter amount from lin						21	ļ
22 Total. Add amounts from line 12, lines							
Enter here and on the appropriate line					<u>ons</u>	22	9,857
23 For assets shown above and placed in		urrent year, ente	er the portion				
of the basis attributable to section 263	A costs			23	1		i* ^