Form **990**

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning , 2023, and ending , 20

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: GENYOUTH, INCORPORATED

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 10255 WEST HIGGINS ROAD, STE 900 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: ROSEMONT, IL 60018-5638

D Employer identification number: 27-0988546

E Telephone number: (847) 803-2000

G Gross receipts $ 10,996,058

F Name and address of principal officer: QUINTON BAILY
10255 WEST HIGGINS ROAD, STE 9, ROSEMONT, IL 60018-5638

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.GENYOUTHNOW.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 2009

M State of legal domicile: DC

Part I Summary

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)	3	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	13
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	9,831,534	10,667,155
	9	Program service revenue (Part VIII, line 2g)	104,400	45,600
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	57,338	193,763
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	(2,340,079)	(1,838,420)
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,653,193	9,068,098
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,526,536	3,858,191
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	980,548	1,071,196
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) 0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,987,739	2,188,305
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	9,494,823	7,117,692
	19	Revenue less expenses. Subtract line 18 from line 12	(1,841,630)	1,950,406
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	7,493,636	10,144,541
	21	Total liabilities (Part X, line 26)	1,605,031	2,305,530
	22	Net assets or fund balances. Subtract line 21 from line 20	5,888,605	7,839,011

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 Here

Quinton Baily — Signature of officer — Date 9/23/2024

QUINTON BAILY, CFO — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
AMBER N. DOANE		09/23/2024		P01391011

Firm's name: ERNST & YOUNG US LLP — Firm's EIN: 34-6565596

Firm's address: 1101 NEW YORK AVENUE NW , WASHINGTON, DC 20005 — Phone no.: (202) 327-6000

May the IRS discuss this return with the preparer shown above? See instructions ☑ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form **990** (2023)

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 3,891,935 including grants of $ 2,970,077) (Revenue $ 0)

FUEL UP IS AN IN-SCHOOL HEALTH AND WELLNESS INITIATIVE CREATED BY AMERICA'S DAIRY FARMERS IN COLLABORATION WITH THE NATIONAL DAIRY COUNCIL (NDC) TO HELP MEET THE NEEDS OF SCHOOLS WHEN IT COMES TO FUELING HEALTHY BODIES AND HEALTHY MINDS. THE INITIATIVE FOCUSES ON HELPING EDUCATORS AND STUDENTS FUEL WELLNESS IN AREAS THAT MATTER MOST, LIKE BEING MINDFUL AND STAYING HEALTHY. IT PROVIDES EDUCATIONAL RESOURCES AND GRANT/FUNDING OPPORTUNITIES TO INCREASE ACCESS TO GOOD NUTRITION AND OVERALL WELLNESS.

4b (Code:) (Expenses $ 1,123,671 including grants of $ 836,254) (Revenue $ 0)

GENYOUTH'S END STUDENT HUNGER GRANT PROGRAM HAS ASSISTED SCHOOLS NATIONWIDE WITH INCREASING ACCESS AND PARTICIPATION IN SCHOOL MEALS, ESPECIALLY SCHOOL BREAKFAST. SINCE THE PROGRAM INCEPTION DURING THE ONSET OF COVID-19, GENYOUTH HAS PROVIDED GRANTS OF UP TO $3,000 PER SCHOOL TO SUPPLY MUCH-NEEDED RESOURCES FOR MEAL DISTRIBUTION AND DELIVERY EFFORTS TO GET FOOD TO STUDENTS. INCLUSIVE OF GRAB-AND-GO CARTS, ROLLING MILK COOLERS, SMOOTHIE EQUIPMENT, AND SOFT-SIDED COOLERS. THIS EQUIPMENT WILL HELP ENSURE EQUITABLE ACCESS TO HEALTHY SCHOOL MEALS FOR ALL SCHOOL CHILDREN.

4c (Code:) (Expenses $ 504,385 including grants of $ 51,860) (Revenue $ 45,600)

ADVENTURE CAPITAL IS AN INNOVATIVE PROGRAM CREATED TO INSPIRE, EMPOWER AND FUND YOUTH-DRIVEN INITIATIVES THAT IMPROVE NUTRITION, PHYSICAL ACTIVITY, AND STUDENT ACHIEVEMENT IN SCHOOLS AND COMMUNITIES NATIONWIDE. BY APPLYING THE PRINCIPLES OF ENTREPRENEURIAL THINKING TO THE CHALLENGE OF SCHOOL WELLNESS, ADVENTURE CAPITAL GIVES STUDENTS THE OPPORTUNITY TO "PITCH" THEIR IDEAS TO BUSINESS AND HEALTH AND WELLNESS LEADERS FOR POTENTIAL FUNDING AND IMPLEMENTATION AND DEVELOP LIFE-LONG SKILLS ALONG THE WAY.

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

(Expenses $ 242,306 including grants of $ 0) (Revenue $ 0)

4e Total program service expenses 5,762,297

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✔	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	✔	
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		✔
4	**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*	4		✔
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		✔
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		✔
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		✔
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✔
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		✔
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		✔
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	✔	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		✔
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		✔
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		✔
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✔
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		✔
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	✔	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		✔
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✔
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✔
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		✔
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		✔
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		✔
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		✔
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	✔	
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		✔
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✔
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✔	

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		✔
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		✔
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 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		✔
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 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		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✔
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 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		✔
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		✔
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		✔
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		✔
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		✔
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		✔
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	✔	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✔
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✔
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		✔
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		✔
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		✔
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✔
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		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		✔
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, Part VI*	37		✔
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	✔	

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
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	27		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✔	

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

				Yes	No
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	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		✔
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		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 account)?		4a		✔
b	If "Yes," enter the name of the foreign country ---------- See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		✔
b	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 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		
7	**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 and services provided to the payor?		7a		✔
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		✔
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		✔
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		✔
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 sponsoring organization have excess business holdings at any time during the year?		8		
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:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	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.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.		13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		✔
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15		✔
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		✔
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.		17		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	11		
b	Enter the number of voting members included on line 1a, above, who are independent .	1b	11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			✔
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		✔	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			✔
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			✔
6	Did the organization have members or stockholders?	6			✔
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			✔
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			✔
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		✔	
b	Each committee with authority to act on behalf of the governing body?	8b		✔	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			✔

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✔
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✔
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	✔	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✔	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	✔	
13	Did the organization have a written whistleblower policy?	13	✔	
14	Did the organization have a written document retention and destruction policy?	14	✔	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		✔
b	Other officers or key employees of the organization	15b		✔
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✔
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed CA, IL, NY

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

☐ Own website ☐ Another's website ☑ Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

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

QUINTON BAILY, 10255 WEST HIGGINS RD, SUITE 900, ROSEMONT, IL 60018-5638, (847) 803-2000

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) AUDREY DONAHUE	1.0									
DIRECTOR	0.0	✔						0	0	0
(2) CARLA HALL	1.0									
DIRECTOR	0.0	✔						0	0	0
(3) DEMAURICE SMITH	1.0									
DIRECTOR (THRU 7/23)	0.0	✔						0	0	0
(4) DONALD PAONI	1.0									
DIRECTOR	0.0	✔						0	0	0
(5) DONNA MARTIN	1.0									
DIRECTOR	0.0	✔						0	0	0
(6) JAMES BROWN	1.0									
DIRECTOR	0.0	✔						0	0	0
(7) JEFF MILLER	1.0									
DIRECTOR	0.0	✔						0	0	0
(8) JOE JORDAN	1.0									
DIRECTOR	0.0	✔						0	0	0
(9) KYLE RUDOLPH	1.0									
DIRECTOR	0.0	✔						0	0	0
(10) RICHARD EDELMAN	1.0									
DIRECTOR (THRU 12/23)	0.0	✔						0	0	0
(11) ROGER GOODELL	1.0									
DIRECTOR	0.0	✔						0	0	0
(12) SELWYN VICKERS	1.0									
DIRECTOR	0.0	✔						0	0	0
(13) STEVE H. NELSON	1.0									
DIRECTOR	0.0	✔						0	0	0
(14) ANN MARIE KRAUTHEIM	40.0									
PRESIDENT AND CEO	0.0			✔				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) BARBARA O'BRIEN	1.0									
CHAIR	0.0			✔				0	0	0
(16) MARK BLOCK	40.0									
COO	0.0			✔				0	0	0
(17) QUINTON BAILY	1.0									
CFO	0.0			✔				0	0	0
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b **Subtotal**								0	0	0
c **Total from continuation sheets to Part VII, Section A**								0	0	0
d **Total (add lines 1b and 1c)**								0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 0

			Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		✔
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		✔
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		✔

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
THE DELISLE GROUP DBA CULINARY KICKOFF, 3001 BRIDGEWAY BLVD STE K 168, SAUSALITO, CA 94965	CONSULTING	1,431,064
DAIRY MANAGEMENT, INC., 10255 W HIGGINS ROAD, ROSEMONT, IL 60018	CONSULTING	1,149,520
MMS EDUCATION INC., 1717 LANGHORNE-NEWTON ROAD, SUITE 301, LANGHORNE, PA 19047	CONSULTING	640,028
CUSTOMED, INC., 808 HADDON AVE, COLLINGSWOOD, NJ 08108	CONSULTING	384,516
WATKINSON MILLER, 1100 NEW JERSEY AVE, SE, SUITE 910, WASHINGTON 20003	CONSULTING	337,220

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 9

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	2,250,662				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,416,493				
	g	Noncash contributions included in lines 1a–1f	1g	$ 305,574				
	h	**Total.** Add lines 1a–1f			10,667,155			
Program Service Revenue				Business Code				
	2a	PROFESSIONAL SERVICES		900099	45,600	45,600		
	b							
	c							
	d							
	e							
	f	All other program service revenue			0	0	0	0
	g	**Total.** Add lines 2a–2f			45,600			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			193,763			193,763
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
				(i) Real / (ii) Personal				
	6a	Gross rents	6a					
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c	0 / 0				
	d	Net rental income or (loss)						
				(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a					
	b	Less: cost or other basis and sales expenses	7b					
	c	Gain or (loss)	7c	0 / 0				
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including $ 2,250,662 of contributions reported on line 1c). See Part IV, line 18	8a	89,540				
	b	Less: direct expenses	8b	1,927,960				
	c	Net income or (loss) from fundraising events			(1,838,420)			(1,838,420)
	9a	Gross income from gaming activities. See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances	10a					
	b	Less: cost of goods sold	10b					
	c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue				Business Code				
	11a							
	b							
	c							
	d	All other revenue			0	0	0	0
	e	**Total.** Add lines 11a–11d			0			
	12	**Total revenue.** See instructions			9,068,098	45,600	0	(1,644,657)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,858,191	3,858,191		
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	0	0		
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	872,276	532,942	339,334	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	76,942	41,933	35,009	
9 Other employee benefits	58,583	31,928	26,655	
10 Payroll taxes	63,395	34,550	28,845	
11 Fees for services (nonemployees):				
a Management				
b Legal	339,989	154,452	185,537	
c Accounting	33,182	15,074	18,108	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	1,372,862	825,057	547,805	0
12 Advertising and promotion	22,300	16,406	5,894	
13 Office expenses	137,501	97,956	39,545	
14 Information technology	5,500	2,499	3,001	
15 Royalties				
16 Occupancy	30,677	13,936	16,741	
17 Travel	125,196	71,445	53,751	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	35,564	20,860	14,704	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	5,137	2,334	2,803	
23 Insurance	10,628	4,828	5,800	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a CONTRACTOR EXPENSES	48,005	26,496	21,509	
b OTHER EXPENSES	21,764	11,410	10,354	
c				
d				
e All other expenses	0	0	0	0
25 **Total functional expenses.** Add lines 1 through 24e	7,117,692	5,762,297	1,355,395	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		5,180,250	2	5,371,292
	3	Pledges and grants receivable, net		1,494,687	3	3,684,817
	4	Accounts receivable, net		183,143	4	725
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		0	6	0
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		8,200	8	75
	9	Prepaid expenses and deferred charges		611,346	9	1,070,925
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 34,267			
	b	Less: accumulated depreciation	10b 33,014	6,390	10c	1,253
	11	Investments—publicly traded securities			11	
	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			14	
	15	Other assets. See Part IV, line 11		9,620	15	15,454
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		7,493,636	16	10,144,541
Liabilities	17	Accounts payable and accrued expenses		1,175,031	17	1,291,389
	18	Grants payable			18	226,166
	19	Deferred revenue		430,000	19	787,975
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	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		0	25	0
	26	**Total liabilities.** Add lines 17 through 25		1,605,031	26	2,305,530
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		2,742,473	27	3,143,741
	28	Net assets with donor restrictions		3,146,132	28	4,695,270
		Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		5,888,605	32	7,839,011
	33	Total liabilities and net assets/fund balances		7,493,636	33	10,144,541

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,068,098
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,117,692
3	Revenue less expenses. Subtract line 2 from line 1	3	1,950,406
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,888,605
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 on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	7,839,011

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✔
	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	✔	
	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. ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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	✔	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		✔
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990)

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization	**Employer identification number**
GENYOUTH, INCORPORATED	27-0988546

Part I **Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.

2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

7 ☑ 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 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1–10 above (see instructions))	**(iv)** Is the organization listed in your governing document? Yes	No	**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7,658,115	15,559,477	11,577,220	9,831,534	10,667,155	55,293,501
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 **Total.** Add lines 1 through 3	7,658,115	15,559,477	11,577,220	9,831,534	10,667,155	55,293,501
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 shown on line 11, column (f)						16,342,311
6 **Public support.** Subtract line 5 from line 4						38,951,190

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	7,658,115	15,559,477	11,577,220	9,831,534	10,667,155	55,293,501
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	261,483	79,834	15,319	89,559	193,763	639,958
9 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 VI.)	0	0	0	0	0	0
11 **Total support.** Add lines 7 through 10						55,933,459

12 Gross receipts from related activities, etc. (see instructions) . . . **12** 202,840

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . **14** 69.64 %

15 Public support percentage from 2022 Schedule A, Part II, line 14 . . . **15** 64.47 %

16a **33 1/3% support test—2023.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . ☑

b **33 1/3% support test—2022.** 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 **stop here**. The organization qualifies as a publicly supported organization . . . ☐

17a **10%-facts-and-circumstances test—2023.** 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . ☐

b **10%-facts-and-circumstances test—2022.** 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . ☐

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

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Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
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 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2023** (line 10c, column (f), divided by line 13, column (f)) . . .	17	%
18	Investment income percentage from **2022** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2023.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . ☐

b **33 1/3% support tests—2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . ☐

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Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			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		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c 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.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c 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		
c	**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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI**.*	9a		
b	Did one or more disqualified persons (as defined on 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		
c	Did a disqualified person (as defined on 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		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV **Supporting Organizations** *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* ***Part VI****.*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (****see instructions****).*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer lines 2a and 2b below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. ***Answer lines 3a and 3b below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in* ***Part VI****.*	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	**3b**		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* ***Part VI***). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B—Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**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 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C—Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

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Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D—Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in* ***Part VI***)	5	
6	Other distributions (*describe in* ***Part VI***). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions.	8	
9	Distributable amount for 2023 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E—Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2023**	**(iii) Distributable Amount for 2023**
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—*explain in* ***Part VI***). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
e	From 2022			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI***. See instructions.			
7	**Excess distributions carryover to 2024.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019 . . .			
b	Excess from 2020 . . .			
c	Excess from 2021 . . .			
d	Excess from 2022 . . .			
e	Excess from 2023 . . .			

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Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: GENYOUTH, INCORPORATED

Employer identification number: 27-0988546

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)
☐ Preservation of a historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

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

b Assets included in Form 990, Part X $

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Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . ☐ **Yes** ☐ **No**

Part IV **Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table.

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V **Endowment Funds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %
b Permanent endowment _____ %
c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations?	3a(i)		
(ii) Related organizations?	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	25,314		24,061	1,253
e Other	8,953		8,953	0
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				1,253

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Part VII **Investments—Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, line 12, col. (B))*		

Part VIII **Investments—Program Related**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, line 13, col. (B))*		

Part IX **Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	

Part X **Other Liabilities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	

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

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	12,641,596
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	1,645,538		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines **2a** through **2d**			2e	1,645,538
3	Subtract line **2e** from line **1**			3	10,996,058
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	(1,927,960)		
c	Add lines **4a** and **4b**			4c	(1,927,960)
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	9,068,098

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	10,691,190
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	1,645,538		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines **2a** through **2d**			2e	1,645,538
3	Subtract line **2e** from line **1**			3	9,045,652
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 XIII.)	4b	(1,927,960)		
c	Add lines **4a** and **4b**			4c	(1,927,960)
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	7,117,692

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 XIII

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.

Return Reference - Identifier	Explanation
SCHEDULE D, PART XI, LINE 4(B) - OTHER REVENUE	**(a)** Description: FUNDRAISING EXPENSE; **(b)** Amount: - 1,927,960
SCHEDULE D, PART XII, LINE 4(B) - OTHER EXPENSES	**(a)** Description: FUNDRAISING EXPENSE; **(b)** Amount: - 1,927,960

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: GENYOUTH, INCORPORATED

Employer identification number: 27-0988546

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
			Yes	**No**			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 TNFL '23 (event type)	(b) Event #2 ANNUAL BENEFIT (event type)	(c) Other events 1 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,601,336	738,866		2,340,202
	2 Less: Contributions	1,601,336	649,326		2,250,662
	3 Gross income (line 1 minus line 2)	0	89,540	0	89,540
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes	66,938	19,541		86,479
	6 Rent/facility costs	185,286	180,810		366,096
	7 Food and beverages	194,579	86,565		281,144
	8 Entertainment	78,500	3,000		81,500
	9 Other direct expenses	627,399	289,449	195,893	1,112,741
	10 Direct expense summary. Add lines 4 through 9 in column (d)				1,927,960
	11 Net income summary. Subtract line 10 from line 3, column (d)				(1,838,420)

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

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

b If "No," explain: _____

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

b If "Yes," explain: _____

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

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

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

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

Name _____

Address _____

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

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

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

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation $ _____

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

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

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: GENYOUTH, INCORPORATED

Employer identification number: 27-0988546

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CLARK COUNTY SCHOOL DISTRICT 5100 W SAHARA AVE, LAS VEGAS, NV 89146	82-6000733	501(C)(3)	0	148,566	FMV	(SEE STATEMENT)	(SEE STATEMENT)
(2) WASHOE CO SCHOOL DISTRICT 425 EAST 9TH STREET, RENO, NV, 89512	88-6000919	501(C)(3)	0	84,358	FMV	(SEE STATEMENT)	(SEE STATEMENT)
(3) GUILFORD COUNTY SCHOOLS 501 W. WASHINGTON ST., GREENSBORO, NC 27401	56-6000522	501(C)(3)	0	48,192	FMV	EQUIPMENT	(SEE STATEMENT)
(4) DOUGLAS COUNTY SCHOOL DISTRICT 620 WILCOX STREET, CASTLE ROCK, CO, 80104	84-6011446	501(C)(3)	40,602	7,168	FMV	(SEE STATEMENT)	(SEE STATEMENT)
(5) SOCORRO IND SCHOOL DISTRICT 12440 ROJAS DR, EL PASO, TX 79928	74-6029385	501(C)(3)	42,000	4,063	FMV	(SEE STATEMENT)	(SEE STATEMENT)
(6) NEVADA DEPT OF EDUCATION 2080 E FLAMINGO RD, LAS VEGAS, NV, 89119	94-1517788	501(C)(3)	0	36,126	FMV	NFL FLAG KITS	(SEE STATEMENT)
(7) TUCSON UNIFIED SCHOOL DISTRICT 1010 E TENTH ST, TUCSON, AZ, 85719	86-6000551	501(C)(3)	0	35,934	FMV	(SEE STATEMENT)	(SEE STATEMENT)
(8) ST TAMMY PARISH SCHOOL DISTRICT 321 N. THEARD STREET, COVINGTON, LA, 70433	72-6001305	501(C)(3)	0	35,649	FMV	EQUIPMENT	(SEE STATEMENT)
(9) IBERVILLE PARISH SCHOOL DISTRICT 58060 PLAQUEMINE ST, PLAQUEMINE, LA 70764	72-6000552	501(C)(3)	0	27,457	FMV	(SEE STATEMENT)	(SEE STATEMENT)
(10) NORTHEAST HIGH SCHOOL 1601 COTTMAN AVE, PHILADELPHIA, PA, 19111	23-6004102	501(C)(3)	0	26,731	FMV	NFL FLAG KITS	(SEE STATEMENT)
(11) DENVER PUBLIC SCHOOLS 1860 LINCOLN STREET, DENVER, CO, 80203	84-6001099	501(C)(3)	25,907	741	FMV	NFL FLAG KITS	(SEE STATEMENT)
(12) (SEE STATEMENT)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 90

3 Enter total number of other organizations listed in the line 1 table . . . 0

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50055P **Schedule I (Form 990) 2023**

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(SEE STATEMENT)

Part II **Grants and Other Assistance to Governments and Organizations in the United States** (continued)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(12) RICHARD J RUNDLE ELEM SCHOOL 425 N. CHRISTY LANE, LAS VEGAS, NV, 89110	88-6000030	501(C)(3)	9,000	12,845	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(13) VANCOUVER PUBLIC SCHOOLS 2901 FALK RD, VANCOUVER, WA, 98661	91-6001540	501(C)(3)	0	21,121	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(14) INDIANAPOLIS PUBLIC SCHOOL DISTRICT 120 E. WALNU ST, INDIANAPOLIS, IN, 46204	35-6002486	501(C)(3)	0	20,986	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(15) CHICAGO PUBLIC SCHOOL DIST 299 42 W. MADISON STREET, CHICAGO, IL, 60602	36-6005821	501(C)(3)	0	20,856	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(16) MIAMI-DADE COUNTY SCHOOLS 1450 NE 2ND AVD, MIAMI, FL, 33132	59-6000572	501(C)(3)	0	20,032	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(17) HOUSTON INDEPENDENT SCHOOL DISTRICT 4400 WEST 18TH ST., HOUSTON, TX, 77092	74-6001255	501(C)(3)	0	19,836	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(18) COBB COUNTY SCHOOL DISTRICT 514 GLOVER STREET, MARIETTA, GA, 30060	58-6000214	501(C)(3)	0	16,514	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(19) PITTSBURGH PUBLIC SCHOOL 341 S. BELLEFIELD AVE, PITTSBURGH, PA, 15213	25-1157808	501(C)(3)	0	16,373	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(20) CHERRY CREEK SCHOOL DIST 5 4700 SOUTH YOSEMITE STREET, GREENWOOD VILLAGE, CO, 80111	84-6000861	501(C)(3)	12,329	3,838	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(21) EAST BATON ROUGE PARISH SCHOOL DISTRICT 3000 N. SHERWOOD FOREST DRIVE, BLDG, BATON ROUGE, LA 70814	72-6000353	501(C)(3)	13,379	2,737	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(22) SAN BENITO CONS IND SCHOOL DISTRICT 240 N. CROCKETT ST, SAN BENITO, TX 78586	74-6002224	501(C)(3)	15,929	0			COMBAT FOOD INSECURITY IN SCHOOLS
(23) PHARR-SAN JUAN-ALAMO ISD 601 E KELLY AVE, PHARR, TX, 78577	74-6001876	501(C)(3)	12,540	3,255	FMV	NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(24) PRINCETON CITY SCHOOL DISTRICT 3900 COTTINGHAM DR, CINCINNATI, OH, 45241	31-6006941	501(C)(3)	10,000	5,386	FMV	NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(25) WICOMICO COUNTY PUBLIC SCHOOLS 2424 NORTHGATE DRIVE , SALISBURY, MD, 21801	52-6001052	501(C)(3)	0	14,782	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(26) NEW YORK CITY DEPARTMENT OF EDUCATION 65 COURT STRET , BROOKLYN, NY, 11201	13-6400434	501(C)(3)	0	14,252	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(27) DINWIDDIE COUNTY PUBLIC SCHOOLS 14016 BOYDTON PLANK ROAD, DINWIDDIE, VA, 23841	54-6001255	501(C)(3)	0	14,056	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(28) DESERT SANDS UNIFIED SCHOOL DISTRICT 47-950 DUNE PALMS ROAD, LA QUINTA, CA, 92253	33-0452541	501(C)(3)	0	13,783	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(29) ROUND ROCK ISD 1311 ROUND ROCK AVE., ROUND ROCK, TX, 78681	74-6002018	501(C)(3)	13,750	0			COMBAT FOOD INSECURITY IN SCHOOLS
(30) MIDLAND ISD 615 W MISSOURI AVE., MIDLAND, TX, 79701	75-6002064	501(C)(3)	13,158	516	FMV	NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(31) NEW YORK CITY PUBLIC SCHOOLS 44.36 VERNON BLVD, LONG ISLAND CITY, NY, 11101	69-0210637	501(C)(3)	0	13,379	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(32) HILLSBOROUGH COUNTY PUBLIC SCHOOL 901 EAST KENNEDY BLVD, TAMPA, FL, 33602	59-6000660	501(C)(3)	0	13,247	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(33) CASA GRANDE UNION HIGH SCHOOL DISTRICT 82 1362 N. CASA GRANDE AVE., CASA GRANDE, AZ, 85122	86-0992578	501(C)(3)	10,000	2,495	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(34) BIBB COUNTY SCHOOL DISTRICT 484 MULBERRY STREET, MACON, GA, 31201	01-1031042	501(C)(3)	0	12,048	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(35) OAKLAND UNIFIED SCHOOL DISTRICT 1011 UNION STREET, OAKLAND, CA, 94607	94-6000385	501(C)(3)	0	12,008	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(36) ELKO CO SCHOOL DISTRICT 850 ELM STREET, ELKO, NV, 89801	88-6000985	501(C)(3)	0	11,870	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(37) CASA GRANDE ELEMENTARY SCHOOL DISTRICT 501 SOUTH FLORENCE STREET, CASA GRANDE, AZ, 85122	86-0942071	501(C)(3)	0	11,355	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(38) NYE CO SCHOOL DISTRICT 484 S. WEST STREET, PAHRUMP, NV, 89048	88-6001054	501(C)(3)	0	10,548	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(39) DAYTON PUBLIC SCHOOL DISTRICT 136 S. LUDLOW STREET, DAYTON, OH, 45402	31-6000784	501(C)(3)	0	10,123	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(40) GEORGETOWN COUNTY SCHOOL DISTRICT 2018 W CHURCH ST, GEORGETOWN, SC, 29440	57-6000354	501(C)(3)	0	10,040	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(41) JACKSON-MADISON COUNTY SCHOOL DISTRICT 310 NORTH PARKWAY, JACKSON, TN, 38305	62-6000732	501(C)(3)	0	10,040	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(42) SEVIER COUNTY SCHOOL DISTRICT 226 CEDAR ST, SEVIERVILLE, TN, 37862	62-6000831	501(C)(3)	0	10,040	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(43) GARDEN GROVE UNIF SCHOOL DISTRICT 10331 STANFORD AVE, GARDEN GROVE, CA 92840	95-2378800	501(C)(3)	9,000	1,032	FMV	NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(44) EVERETT PUBLIC SCHOOLS 121 VINE STREET, EVERETT, MA, 02149	04-6006133	501(C)(3)	10,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(45) ROUND LAKE COMMUNITY UNIT SCHOOL DISTRICT 116 884 W. NIPPERSINK RD, ROUND LAKE, IL, 60073	36-2663955	501(C)(3)	10,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(46) HUNT FAMILY FOUNDATION ONE ARROWHEAD DRIVE, KANSAS CITY, MO, 64129	43-1299453	501(C)(3)	10,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(47) BERRYESSA UNION SCHOOL DISTRICT 136 PIEDMONT ROAD, SAN JOSE, CA, 95132	58-2173450	501(C)(3)	10,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(48) CLEAR CREEK ISD CHILD NUTRITION DEPARTMENT 2145 WEST NASA BLVD, WEBSTER, TX, 77598	74-6001592	501(C)(3)	10,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(49) HAYWARD UNIFIED SCHOOL DISTRICT 24411 AMADOR STREET, HAYWARD, CA, 94544	94-1693499	501(C)(3)	10,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(50) GALENA PARK ISD 14705 WOODFOREST BOULEVARD, HOUSTON, TX, 77015	74-6000895	501(C)(3)	9,622	0			COMBAT FOOD INSECURITY IN SCHOOLS
(51) WAYNE- WESTLAND COMMUNITY SCHOOL DISTRICT 36745 MARQUETTE, WESTLAND, MI, 48185	38-6004180	501(C)(3)	0	9,621	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(52) AUSTIN ISD FOOD SERVICE 3701 WOODBURY DR., AUSTIN, TX, 78704	74-6000064	501(C)(3)	8,800	741	FMV	NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(53) LEE'S SUMMIT SCHOOL DIST R7 301 N.E. TUDOR ROAD, LEE'S SUMMIT, MO, 64086	44-6004933	501(C)(3)	0	8,998	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(54) WINSTON-SALEM FORSYTH COUNTY SCHOOLS 475 CORPORATE SQUARE DRIVE, WINSTON-SALEM, NC, 27105	56-0795164	501(C)(3)	0	8,741	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(55) CASWELL CO SCHOOL DISTRICT 319 MAIN STREET E, YANCEYVILLE, NC, 98816	56-6001002	501(C)(3)	0	8,257	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(56) ROCKINGHAM COUNTY PUBLIC SCHOOLS 1210 NORTH LIBERTY STREET, HARRISONBURG, VA, 22802	54-6001584	501(C)(3)	0	8,032	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(57) NORTHHAMPTON COUNTY SCHOOLS 701 N.CHURCH STREET, JACKSON, NC, 27845	56-6001087	501(C)(3)	0	8,032	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(58) ABBEVILLE COUNTY SCHOOL DISTRICT 400 GREENVILLE ST, ABBEVILLE, SC, 29620	57-6001577	501(C)(3)	0	8,032	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(59) JEFFERSON CO PUBLIC SCHOOLS 1829 DENVER WEST DRIVE #27, GOLDEN, CO, 80401	84-6002817	501(C)(3)	0	7,900	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(60) EAST CENTRAL ISD 12271 DONOP ROAD, SAN ANTONIO, TX, 78223	74-1562392	501(C)(3)	7,617	0			COMBAT FOOD INSECURITY IN SCHOOLS
(61) LYON CO SCHOOL DISTRICT 25 EAST GOLDFIELD AVE, YERINGTON, NV, 89447	88-6000999	501(C)(3)	0	7,450	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(62) SOUTHWEST ISD 11914 DRAGON LANE, BUILDING 600, SAN ANTONIO, TX, 78252	74-1461322	501(C)(3)	6,857	516	FMV	NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(63) LAKE CHELAN SCHOOL DISTRICT 309 E JOHNSON AVE, CHELAN, WA, 27379	91-1543058	501(C)(3)	0	7,247	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(64) WASHINGTON ELEM SCH DIST 6 4650 WEST SWEETWATER, GLENDALE, AZ, 85304	86-6000484	501(C)(3)	0	7,232	FMV	EQUIPMENT, NFL FLAG KITS	COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(65) DENVER PUBLIC SCHOOLS 1860 LINCOLN STREET, DENVER, CO, 80203	84-1224325	501(C)(3)	0	7,159	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(66) CANTON CITY SCHOOL DISTRICT 305 MCKINLEY AVE NW, CANTON, OH, 44702	34-6000503	501(C)(3)	0	7,027	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(67) FARMINGDALE UNION FREE SCHOOL DISTRICT 50 VAN COTT AVE, FARMINGDALE, NY, 11735	11-6002049	501(C)(3)	5,000	1,967	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(68) COMPTON UNIFIED SCHOOL DIST 501 S. SANTA FE AVENUE, COMPTON, CA, 90221	95-2650551	501(C)(3)	0	6,709	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(69) PENDERGAST ELEM SCH DIST 92 3802 N. 91ST AVE, PHOENIX, AZ, 85037	86-6000522	501(C)(3)	0	6,670	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(70) BUFFALO PUBLIC SCHOOLS 712 CITY HALL 65 NIAGARA SQUARE, BUFFALO, NY, 14202	16-6001554	501(C)(3)	0	6,643	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(71) LOS ANGELES UNIFIED SCHOOL DISTRICT 333 SOUTH BEAUDRY AVE, LOS ANGELES, CA 90017	95-6001908	501(C)(3)	0	6,352	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(72) HEARD COUNTY SCHOOL DISTRICT 131 EAST COURT SQUARE, FRANKLIN, GA, 30217	58-6000262	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(73) MARSHALL COUNTY SCHOOL DISTRICT 700 JONES CIRCLE, LEWISBURG, TN, 37091	62-6000740	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(74) MORGAN COUNTY SCHOOL DISTRICT 136 FLAT FORK RD, WARTBURG, TN, 37887	62-6000772	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(75) BARNWELL SCHOOL DISTRICT 770 HAGOOD AVENUE, BARNWELL, SC, 29812	87-4616187	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(76) CHEROKEE COUNTY BOARD OF EDUCATION 135 MTN BROOK DR, CANTON, GA, 30115	58-6011458	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(77) CHATTOOGA COUNTY SCHOOL DISTRICT 33 MIDDLE SCHOOL ROAD, SUMMERVILLE, GA, 30747	58-6000208	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(78) HALE COUNTY SCHOOL DISTRICT 1115 POWERS STREET, GREENSBORO, AL, 36744	63-6000912	501(C)(3)	0	6,024	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(79) PINE BUSH CENTRAL SCHOOL DISTRICT STATE ROUTE 302, PINE BUSH, NY, 12566	14-6001391	501(C)(3)	0	5,902	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(80) FEDERAL WAY SCHOOL DISTRICT 33330 8TH AVENUE S., FEDERAL WAY, WA, 98003	91-6001624	501(C)(3)	0	5,896	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(81) NACHES VALLEY SCHOOL DISTRICT 24 SHAFTER AVE, NACHES, WA, 98937	91-6001544	501(C)(3)	0	5,896	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(82) BARRE CITY ELEM MID SCHOOL 50 PARKSIDE TER, BARRE, VT, 05641	35-2650739	501(C)(3)	0	5,837	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(83) OCONTO SCHOOL DISTRICT 400 MICHIGAN AVE, OCONTO, WI, 54153	39-1137246	501(C)(3)	0	5,742	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(84) SCHOOL DISTRICT OF BELOIT 1500 FOURTH STREET, BELOIT, WI, 53511	39-6000935	501(C)(3)	0	5,742	FMV	EQUIPMENT	COMBAT FOOD INSECURITY IN SCHOOLS
(85) CORSICANA IND SCHOOL DISTRICT 100 S. 18TH STREET, CORSICANA, TX, 75110	75-6000800	501(C)(3)	5,444	0			COMBAT FOOD INSECURITY IN SCHOOLS
(86) HUMBOLDT COUNTY SCHOOL DISTRICT 310 E 4TH ST, WINNEMUCCA, NV, 89445	88-6000991	501(C)(3)	0	5,161	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(87) DOUGLAS COUNTY SCHOOL DISTRICT 1638 MONO AVENUE, MINDEN, NV, 89423	88-6000034	501(C)(3)	0	5,161	FMV	NFL FLAG KITS	SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
(88) KEISER UNIVERSITY- FLAGSHIP CAMPUS 2600 N MILITARY TRAIL, WEST PALM BEACH, FL, 33409	01-0674195	501(C)(3)	5,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(89) UNIVERSITY OF MIAMI 1307 STANDFORD DRIVE, CORAL GABLES, FL, 33146	59-0624458	501(C)(3)	5,000	0			COMBAT FOOD INSECURITY IN SCHOOLS
(90) UNIVERSITY OF FLORIDA/OFFICE OF STUDENT FINANCIAL AID & SCHOLARSHIPS 1478 UNION RD, GAINESVILLE, FL, 32611	59-6002052	501(C)(3)	5,000	0			COMBAT FOOD INSECURITY IN SCHOOLS

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	GENYOUTH, INCORPORATED PROVIDES ALL GRANTS TO PUBLIC CHARITIES AND DOES NOT COMPLETE MONITORING AFTER PROVIDING ITS GRANTS.
SCHEDULE I, PART II, COLUMN G - DESCRIPTION OF NON-CASH ASSISTANCE	CLARK COUNTY SCHOOL DISTRICT: EQUIPMENT,NFL FLAG KITS
SCHEDULE I, PART II, COLUMN G - DESCRIPTION OF NON-CASH ASSISTANCE	WASHOE CO SCHOOL DISTRICT: EQUIPMENT, NFL FLAG KITS
SCHEDULE I, PART II, COLUMN G - DESCRIPTION OF NON-CASH ASSISTANCE	DOUGLAS COUNTY SCHOOL DISTRICT: EQUIPMENT, NFL FLAG KITS
SCHEDULE I, PART II, COLUMN G - DESCRIPTION OF NON-CASH ASSISTANCE	SOCORRO IND SCHOOL DISTRICT: EQUIPMENT, NFL FLAG KITS
SCHEDULE I, PART II, COLUMN G - DESCRIPTION OF NON-CASH ASSISTANCE	TUCSON UNIFIED SCHOOL DISTRICT: EQUIPMENT, NFL FLAG KITS
SCHEDULE I, PART II, COLUMN G - DESCRIPTION OF NON-CASH ASSISTANCE	IBERVILLE PARISH SCHOOL DISTRICT: EQUIPMENT, NFL FLAG KITS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	CLARK COUNTY SCHOOL DISTRICT: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	WASHOE CO SCHOOL DISTRICT: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	GUILFORD COUNTY SCHOOLS: COMBAT FOOD INSECURITY IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DOUGLAS COUNTY SCHOOL DISTRICT: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	SOCORRO IND SCHOOL DISTRICT: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	NEVADA DEPT OF EDUCATION: SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	TUCSON UNIFIED SCHOOL DISTRICT: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ST TAMMY PARISH SCHOOL DISTRICT: COMBAT FOOD INSECURITY IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	IBERVILLE PARISH SCHOOL DISTRICT: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	NORTHEAST HIGH SCHOOL: SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DENVER PUBLIC SCHOOLS: COMBAT FOOD INSECURITY AND SUPPORT PHYSICAL ACTIVITIES IN SCHOOLS

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: GENYOUTH, INCORPORATED

Employer identification number: 27-0988546

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods	✔		13,591	NONE
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (FOOTBALLS)	✔	6,985	209,550	MARKET VALUE
26	Other (FOOD/BEVERAGE)	✔	7	58,683	MARKET VALUE
27	Other (EQUIPMENT)	✔	2	15,000	MARKET VALUE
28	Other (GIFT CARDS)	✔	2	8,750	MARKET VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		✔
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		✔
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		✔
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	OTHER - FOOTBALLS NUMBER OF ITEMS OTHER - FOOD/BEVERAGE NUMBER OF CONTRIBUTIONS OTHER - EQUIPMENT NUMBER OF ITEMS OTHER - GIFT CARDS NUMBER OF CONTRIBUTIONS

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.	2023 Open to Public Inspection

Name of the Organization: GENYOUTH, INCORPORATED

Employer Identification Number: 27-0988546

Return Reference - Identifier	Explanation
FORM 990, PART I, LINE 1 -	GENYOUTH, INCORPORATED WAS INCORPORATED ON MAY 8, 2009, IN THE DISTRICT OF COLUMBIA UNDER THE NON-PROFIT CORPORATION ACT. ON JANUARY 24, 2011, THE ORGANIZATION OBTAINED A CERTIFICATE OF REGISTRATION TO OPERATE UNDER THE TRADE NAME GENYOUTH FOUNDATION (GENYOUTH). FOUNDED THROUGH A PARTNERSHIP BETWEEN AMERICA'S DAIRY FARMERS AND THE NATIONAL FOOTBALL LEAGUE, GENYOUTH, INCORPORATED IS A LEADING NATIONAL NON-PROFIT, DEDICATED TO HELP SCHOOL CHILDREN THRIVE BY LIVING WELL-NOURISHED AND PHYSICALLY ACTIVE LIVES. GENYOUTH, INCORPORATED SPECIALIZES IN A RANGE OF NATIONAL INITIATIVES THAT FOSTER NUTRITION EQUITY FOR CHILDREN AND INCREASE OPPORTUNITIES FOR CHILDREN TO BE PHYSICALLY ACTIVE BEFORE, DURING AND AFTER THE SCHOOL DAY. NOTABLY GENYOUTH ENGAGES AND ELEVATES YOUTH VOICE THROUGH YOUTH INSIGHTS AND ITS NATIONAL YOUTH COUNCIL. GENYOUTH, INCORPORATED COORDINATES AND ENLISTS NETWORKS OF PRIVATE AND PUBLIC PARTNERS, CONVENES DIALOGUES, GENERATES INSIGHTS, BUILDS AWARENESS, RAISES FUNDS, AND CHANNELS RESOURCES - ALL IN THE SERVICE OF EMPOWERING YOUTH TO BE THEIR BEST SELVES.
FORM 990, PART III, LINE 1 -	GENYOUTH, INCORPORATED WAS INCORPORATED ON MAY 8, 2009, IN THE DISTRICT OF COLUMBIA UNDER THE NON-PROFIT CORPORATION ACT. ON JANUARY 24, 2011, THE ORGANIZATION OBTAINED A CERTIFICATE OF REGISTRATION TO OPERATE UNDER THE TRADE NAME GENYOUTH FOUNDATION (GENYOUTH). FOUNDED THROUGH A PARTNERSHIP BETWEEN AMERICA'S DAIRY FARMERS AND THE NATIONAL FOOTBALL LEAGUE, GENYOUTH, INCORPORATED IS A LEADING NATIONAL NON-PROFIT, DEDICATED TO HELP SCHOOL CHILDREN THRIVE BY LIVING WELL-NOURISHED AND PHYSICALLY ACTIVE LIVES. GENYOUTH, INCORPORATED SPECIALIZES IN A RANGE OF NATIONAL INITIATIVES THAT FOSTER NUTRITION EQUITY FOR CHILDREN AND INCREASE OPPORTUNITIES FOR CHILDREN TO BE PHYSICALLY ACTIVE BEFORE, DURING AND AFTER THE SCHOOL DAY. NOTABLY GENYOUTH ENGAGES AND ELEVATES YOUTH VOICE THROUGH YOUTH INSIGHTS AND ITS NATIONAL YOUTH COUNCIL. GENYOUTH, INCORPORATED COORDINATES AND ENLISTS NETWORKS OF PRIVATE AND PUBLIC PARTNERS, CONVENES DIALOGUES, GENERATES INSIGHTS, BUILDS AWARENESS, RAISES FUNDS, AND CHANNELS RESOURCES - ALL IN THE SERVICE OF EMPOWERING YOUTH TO BE THEIR BEST SELVES.
FORM 990, PART III, LINE 4D - DESCRIPTION OF OTHER PROGRAM SERVICES	(EXPENSES $242,306 INCLUDING GRANTS OF $0)(REVENUE $0) (EXPENSES $198,472 INCLUDING GRANTS OF $0) (REVENUE $0) YOUTH INSIGHTS IS A DATA-GATHERING PLATFORM THAT UNLOCKS MIDDLE AND HIGH SCHOOL STUDENT INSIGHTS AND PERSPECTIVES ON SOME OF THEIR GENERATION'S GREATEST HEALTH AND WELLNESS CONCERNS. MORE THAN JUST LISTENING TO YOUNG PEOPLE, THOUGHT LEADERSHIP TAKES THESE VALUABLE LEARNINGS AND TRANSLATES THEM INTO COMPELLING STORIES AND OPPORTUNITIES FOR ACTION. UNLIKE TRADITIONAL MARKET RESEARCH, THOUGHT LEADERSHIP ELEVATES THE YOUTH VOICE, STIMULATES THINKING, DIALOGUE, AND ENGAGEMENT AMONG NATIONAL HEALTH, WELLNESS, EDUCATION, BUSINESS AND YOUTH LEADERS. (EXPENSES $43,834 INCLUDING GRANTS OF $0) (REVENUE $0) THE ROOT4HER PROGRAM, DESIGNED ESPECIALLY FOR MIDDLE SCHOOL GIRLS, IS CENTERED ON PROVIDING RESOURCES, SUPPORT, STRATEGIES, AND MOTIVATION TO MAKE MOVEMENT AN IMPORTANT PART OF GIRLS' QUEST FOR SOCIAL, EMOTIONAL, NUTRITIONAL AND PHYSICAL GOOD HEALTH. ROOT4HER ADDRESSES A CRITICAL ISSUE - GIRLS' PARTICIPATION IN PHYSICAL ACTIVITY IS PARTICULARLY CHALLENGED AS THEY MOVE INTO MIDDLE AND HIGH SCHOOL, WITH LOW SELF-CONFIDENCE, BODY IMAGE, AND LACK OF ENCOURAGEMENT AND SUPPORT AMONG THE TOP REASONS GIRLS PHASE OUT FROM BOTH COMPETITIVE AND NON-COMPETITIVE ACTIVITY ALIKE.
FORM 990, PART VI, LINE 3 - DELEGATION OF CONTROL OF MANAGEMENT DUTIES	MANAGEMENT DUTIES ARE DELEGATED TO DAIRY MANAGEMENT, INC (DMI). RESPONSIBILITIES INCLUDE IMPLEMENTATION OF THE DAIRY PROMOTION PROGRAM, SUPERVISION OF EXEMPT PURPOSE AND ANNUAL BUDGET PREPARATION. ANN MARIE KRAUTHEM, PRESIDENT AND CEO OF GENYOUTH, IS AN EMPLOYEE OF DMI. HER 2023 REPORTABLE COMPENSATION IS $377,747 AND OTHER COMPENSATION IS $52,737. THIS COMPENSATION IS FOR SERVICES PROVIDED TO GENYOUTH. QUINTON BAILY, CFO OF GENYOUTH, IS AN EMPLOYEE OF DMI AND HIS 2023 REPORTABLE COMPENSATION OF $454,057 AND OTHER COMPENSATION OF $70,199 IS REPORTED ON DMI'S FORM 990. THIS COMPENSATION IS PARTIALLY FOR SERVICES PROVIDED TO GENYOUTH. BARBARA O'BRIEN, CHAIRMAN OF GENYOUTH, IS AN EMPLOYEE OF DMI AND HER 2023 REPORTABLE COMPENSATION OF $659,900 AND OTHER COMPENSATION OF $57,459 IS REPORTED ON DMI'S FORM 990. THIS COMPENSATION IS PARTIALLY FOR SERVICES PROVIDED TO GENYOUTH. MARK BLOCK, COO OF GENYOUTH, IS AN EMPLOYEE OF DMI AND HIS 2023 REPORTABLE COMPENSATION IS $219,556 AND OTHER COMPENSATION IS $34,442.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE FORM 990 IS REVIEWED BY THE CFO, AN OFFICER OF THE COMPANY.

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	THE CONFLICT OF INTEREST POLICY IS REVIEWED IN DETAIL BY THE ORGANIZATION'S OFFICERS AND CORPORATE ATTORNEYS ANNUALLY. THE OFFICERS ARE REQUIRED TO COMPLETE AN ANNUAL CERTIFICATION OF COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY AND ARE ASKED TO RECUSE THEMSELVES FROM VOTING IF THEY ARE PERSONALLY INVOLVED IN A MATTER THAT COULD GIVE RISE TO CONFLICTS.
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	

(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses
FEES FOR SERVICES	1,372,862	825,057	547,805	
Total	**1,372,862**	**825,057**	**547,805**	**0**