	0	00	Return of Organization Exempt From	Income Tax	OMB No. 1545-0047
Forr	rm 990 Return of Organization Exempt From II Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exc				^{ns)} 2014
		of the Treasury	Do not enter social security numbers on this form as it may be	•	Open to Public
		enue Service	▶ Information about Form 990 and its instructions is at www ar year, or tax year beginning OCT 1, 2014 and ending	<u>.irs.gov/form990.</u> SEP 30, 2015	Inspection
-		í l	f organization	D Employer identified	eation number
	heck if pplicab	le:	-		
Address change BIG SKY YOUTH EMPOWERMENT PROJECT INC Name change Doing business as 81-054320					543203
	_chang _Initial _returr	<u>_</u>	and street (or P.O. box if mail is not delivered to street address) Room/sui		
	Final	PO B	OX 6757		539-0399
	termii ated Amer	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	954,130.
	Ireturr		MAN, MT 59771-6757	H(a) Is this a group re	
	Appli tion pend	[™] FNamea ^{ng} כאאד	nd address of principal officer:PETE MACFADYEN AS C ABOVE	for subordinates	
<u> </u>	·	empt status:		H(b) Are all subordinates in	
			BYEP.ORG	H(c) Group exemptio	list. (see instructions)
					State of legal domicile: MT
	rt I	Summary			
	1		be the organization's mission or most significant activities: ${ t BIG}$ SKY Y	OUTH EMPOWER	MENT
Activities & Governance		PRÓVIDE	S OPPORTUNITIES TO EXTRAORDINARY TEENA	GERS IN ORDE	R TO FOSTER
srna	2	Check this bo	x if the organization discontinued its operations or disposed of mo	ore than 25% of its net as	sets.
ove	3	Number of vo	ting members of the governing body (Part VI, line 1a)	3	6
ڻ ح	4	Number of inc	lependent voting members of the governing body (Part VI, line 1b)	4	6
ŝ	5		of individuals employed in calendar year 2014 (Part V, line 2a)		11
<u>viti</u>	6		of volunteers (estimate if necessary)		97
çţì	7a		d business revenue from Part VIII, column (C), line 12		0.
∢			business taxable income from Form 990-T, line 34		0.
				Prior Year	Current Year
Ð	8	Contributions	and grants (Part VIII, line 1h)	799,421.	642,992.
ňu	9		ce revenue (Part VIII, line 2g)	0.	0.
Revenue	10	•	come (Part VIII, column (A), lines 3, 4, and 7d)	531.	2,387.
Ê	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-11,693.	32,163.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	788,259.	677,542.
	13		milar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14		to or for members (Part IX, column (A), line 4)	0.	0.
Ś	15	<u> </u>		291,053.	339,548.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ► 51,722.	0.	0.
be	b	Total fundrais	ing expenses (Part IX, column (D), line 25)		
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	489,702.	410,973.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)	780,755.	750,521.
	19		expenses. Subtract line 18 from line 12	7,504.	-72,979.
or			•	Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	557,308.	477,171.
ASS J Ba	21		; (Part X, line 26)	9,793.	2,072.
Net ⁻ unc	22		fund balances. Subtract line 21 from line 20	547,515.	475,099.
Pa	rt II	Signatur		• -	• •
		_	I declare that I have examined this return, including accompanying schedules and state	ements, and to the best of m	y knowledge and belief, it is
			. Declaration of preparer (other than officer) is based on all information of which prepar		/
			, , , , , , , , , , , , , , , , , ,		

Sign Here	Signature of officer PETE MACFADYEN, DIRECT Type or print name and title	OR	I	Date					
-	Print/Type preparer's name	Preparer's signature	Date	Check PTIN					
Paid	HEATHER WALSTAD	HEATHER WALSTAD	02/05/	/16 self-employed P01077744					
Preparer	Firm's name 🕒 ANDERSON ZURMUEH			Firm's EIN 81-0385940					
Use Only	Firm's address 1019 EAST MAIN,	STE 201							
	BOZEMAN, MT 5971	5		Phone no. $406 - 556 - 6160$					
May the I	lay the IRS discuss this return with the preparer shown above? (see instructions)								
432001 11-0	D7-14 LHA For Paperwork Reduction Act Notion	ce, see the separate instructions.		Form 990 (2014)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2014) BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 2
Pai	T III Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
•	BIG SKY YOUTH EMPOWERMENT PROVIDES OPPORTUNITIES TO EXTRAORDINARY
	TEENAGERS IN ORDER TO FOSTER SELF RELIANCE, CRITICAL THINKING SKILLS,
	AND COMMUNITY PARTICIPATION THROUGHOUT GALLATIN COUNTY, MONTANA.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
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 \$ 619,712. including grants of \$) (Revenue \$)
	BIG SKY YOUTH EMPOWERMENT PROJECT RAN 43 COEDUCATIONAL PROGRAMS
	ENROLLING 96 YOUTH PARTICPANTS AND 54 MENTORS.
4b	(Code:) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 619,712.
	Form 990 (2014)
432002 11-07-	14
090	2 205 792194 141005 2014.05060 BIG SKY YOUTH EMPOWERMENT P 141005_1

Form	aan	(2014)	
	330	(2014)	

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
6	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	0		- 21
'	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
Ŭ	Schedule D, Part III	8		х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12u	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			<u> </u>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	х	
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	- 11	
19	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
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		X
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		Х
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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		X
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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	054		
	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?	00		v
07	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	х	
	Note. All Form 990 filers are required to complete Schedule O	38	11	

Form **990** (2014)

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Form	990 (2014) BIG SKY YOUTH EMPOWERMENT PROJECT INC t V Statements Regarding Other IRS Filings and Tax Compliance	81-0543	203	P	age 5
	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 1	a 8			
b		b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and report	rtable gaming			
	(gambling) winnings to prize winners?		1c	Х	
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 2	a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	hority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial acc	ount)?	4a		Х
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 Accord	ounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b		Х
с	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 o	organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	es provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	required			
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year7	d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con-	ract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	?	7f		Х

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.	
а	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

b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	
	Note. See the instructions for additional information the organization must report on Schedule O.			
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		
с	Enter the amount of reserves on hand	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	_	14a	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b	

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Form 990 (2014

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BIG SKY YOUTH EMPOWERMENT PROJECT INC

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

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X

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

1a Enter the number of voting members of the governing body at the end of the tax year 1a 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. 1b 6 b Enter the number of voting members included in line 1a, above, who are independent 1b 6 2 X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization become aware during the year of a significant diversion of the organization have members or stockholders? 5 X 6 X 7a Did the organization have members of the governing body? 7a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7a X 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X 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? <i>If "Yes," pro</i>	Sec	tion A. Governing Body and Management				1	
If there are material differences in volting optimis among members of the governing body, or if the governing in the standard of the standard at the standard of the standard	10	Enter the number of voting members of the governing hady at the and of the tax year	1.40	1	6	Yes	No
b decide data for a shorty to a receive committee or similar committe, explain its Shedue 0. b b b Exter the number of voting members included in the 1a, above, who are independent b c c Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other c x d Did to organization delegate control over management duties customarily performed by or under the direct supervision c x d Did to organization make any significant charges to its govering documents since the prior Form 390 was like? c x d Did to organization have members, stockholders? c x x d Did to organization have members, stockholders? c x x d Did to organization have members, stockholders? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x x d Did to organization necessing bod? c x </td <td>Ia</td> <td></td> <td>la</td> <td></td> <td>-</td> <td></td> <td></td>	Ia		la		-		
b Enter the number of volting members included in line 1a, above, who are independent 1b 6 2 Did any officer, director, incluse, or key employees? a a 3 Did any officer, director, incluse, or key employees to a management company or other person? a a 4 Did the organization adee any significant changes to its governing documents since the pore Form 990 was the? a a 4 Did the organization have any significant changes to its governing documents are the pore form 990 was the? a a 5 Did the organization have members, stockholders? a a a 7 Did the organization have members, stockholders? a a a 7 Did the organization have members, stockholders? a a a a 7 Did the organization chave members, stockholders? a							
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 employees to a management duries customarky performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management duries customarky performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management duries customarky performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management duries or the person of m990 was filed? Out the organization bave members as stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Out the organization calculation escence do (or subject to approval by) members, stockholders, or persons ofter han the governing body? Out the organization take members as stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Out the organization calculation escence do (or subject to approval by) members, stockholders, or persons ofter han the governing body? Out the organization take with authority to act on behalf of the governing body? Out the organization have brief of the governing body? Out the organization have brief of the governing body? Out the organization have brief of the governing body? Out the organization have brief of the governing the dor written activities of such chapters, affitiates, organization have brief of the governing the dors witten activities of such chapters, affitiates, organization provide a complete corp) of this form 990 and all members to fits governing body before films the form 990. Out the organization have a written orbitates and extrustes and such approval by independent persons of the organization the everetextor of the organization to review this form 990. Out of	h		11		6		
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persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b at n'*Yes," to line 15a or 15b, describe the process in Schedule O (see instructions). 15b 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? 16a Section C. Disclosure 16b 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990.T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Worn website A onther's website U pon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ PETE MACFADYEN - 406 - 539 - 0399 PO BOX 6757, BOZEMAN, MT 59771-6757	14	Did the organization have a written document retention and destruction policy?			14	X	
a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b X if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a X 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 X 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? 16a X Section C. Disclosure 11bb NONE 11bb 12b 17 List the states with which a copy of this Form 990 is required to be filed NONE 10b 10b 10b 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 10b 10b 10b 10c 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 10c 10c 10c 10c 10c 10c	15	Did the process for determining compensation of the following persons include a review and approv	val by	ndependent			
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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 X 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? 16a X Section C. Disclosure 16b 16b 16b 16b 16b 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE NONE 16b	b				15b		X
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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 in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's Section C. Disclosure 17 18 Section 6104 requires an organization to make its Form 900 is required to be filed ▶ 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 17 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: PETE MACFADYEN - 406-539-0399 PO BOX 6757, BOZEMAN, MT 59771-6757 432006 11-07-14	16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a			
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exempt status with respect to such arrangements? 16b Section C. Disclosure NONE 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Image: Check all that apply. Image: Check all that apply. 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. Image: Check all the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Image: PETE MACFADYEN - 406-539-0399 PO BOX 6757, BOZEMAN, MT 59771-6757 Form 990 (201-46	b						
 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ PETE MACFADYEN - 406-539-0399 PO BOX 6757, BOZEMAN, MT 59771-6757 432006 11-07-14 			anizati	on's			
 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. IX Own website Another's website Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶					16b		
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for public inspection. Indicate how you made these available. Check all that apply.	17						
X Own website Another's website Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ PETE MACFADYEN - 406-539-0399 PO BOX 6757, BOZEMAN, MT 59771-6757 Form 990 (201- 6	18		-T (Sec	tion 501(c)(3)s only)	availa	ble	
 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ► PETE MACFADYEN - 406-539-0399 PO BOX 6757, BOZEMAN, MT 59771-6757 432006 11-07-14 							
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20 State the name, address, and telephone number of the person who possesses the organization's books and records: ► <u>PETE MACFADYEN - 406-539-0399</u> <u>PO BOX 6757, BOZEMAN, MT 59771-6757</u> 432006 11-07-14 Form 990 (201- 6	19		onflict	of interest policy, ar	nd fina	ncial	
PETE MACFADYEN - 406-539-0399 PO BOX 6757, BOZEMAN, MT 59771-6757 432006 11-07-14 Form 990 (2014)							
PO BOX 6757, BOZEMAN, MT 59771-6757 432006 11-07-14 6	20		ooks a	ind records:			
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-	432006	_			FOU	11 990	(2014
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Part VII	Compensation of Officers, I	Directors, Truste	es, Key Employees	, Highest Compens	sated
	Employees, and Independer	nt Contractors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	ſ		(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle	heck ss pe	erson	than is bot pr/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
			Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(1) RICH HOHNE PRESIDENT	3.00	x		x				0.	0.	0.
(2) CHRISTI COUBROUGH	3.00	\square								
TREASURER		X		x				0.	0.	0.
(3) CLAIRE BAKER	3.00									
SECRETARY		X		х				0.	0.	0.
(4) AMY HART	3.00									
BOARD MEMBER		Х						0.	0.	0.
(5) CHUCK BORG	3.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(6) SCOTT DEHLENDORF	3.00									
BOARD MEMBER		X						0.	0.	0.
(7) PETER W. MACFADYEN	40.00	4								10 040
EXECUTIVE DIRECTOR		┢		X				75,000.	0.	18,043.
		-								
		┢								
		-								
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Form 990 (2014)

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2014.05060 BIG SKY YOUTH EMPOWERMENT P 141005 1

	n 990 (2014) BIG SKY	YOUTH EI	MP(JWI	ERN	4EJ	NT	P]	ROJECT	INC	81-0	<u>543</u>	203	Pa	age 8
Pa	rt VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C	Compensate	d Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	box offi	not c , unle	ss pe	ition more rson	than is bot pr/trus	h an	(D) Reportable compensation from		compensatio	(E) Reportable compensation from related		(F) timate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	th organi (W-2/109	zation	organizations (W-2/1099-MISC)		compensa from the organizat and relat organizati		e ion ed
			<u></u>	드	Of	Ke	포망	9							
	Sub-total								7!	5,000.		0.	1	8,0,	
d	Total from continuation sheets to Part V Total (add lines 1b and 1c)									0. 5,000.		0.	1	8,0,	0. 43.
2	Total number of individuals (including but n compensation from the organization	iot iimited to tr	lose	IISTE	ed al		e) wr		eceived mor	e than \$100	J,000 of reportab			Yes	0 No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual		, 	· · · · · ·			, 		•			3		Х
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$15 Did any person listed on line 1a receive or a	0,000?	" со	mple	ete S	Sche	edule	e J f	for such indiv	vidual			4		X
	rendered to the organization? If "Yes," com ction B. Independent Contractors	-				-			-				5		X
1	Complete this table for your five highest co the organization. Report compensation for	-	-									npens			
	(A) Name and business	address	N	ONI	Ξ				Des	(B) cription of s	ervices	С	(C ompe	;) nsatior	<u> </u>
2	Total number of independent contractors (i	including but r	not li	mite	d to	tho	se li	stec	d above) who	o received n	nore than				
43200	\$100,000 of compensation from the organi						0						Form	990 (2	2014)
43200 11-07	-14														

Form	n 990) (ź	2014) BIG S	SKY YOUTH	EMPOWER	MENT PROJE	CT INC	81-0543	203 Page 9
Pa	rt V	/	Statement of Reve	nue					
			Check if Schedule O cont	tains a response	or note to any lin				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1	a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
Am (с	Fundraising events	1c	324,976.				
Gifi		d	Related organizations	1d					
ns, Sim			Government grants (contribut						
er S		f	All other contributions, gifts, gran		210 010				
Oth			similar amounts not included abo		318,016.				
pu		-	Noncash contributions included in lines		264,152.	642,992.			
a O		h	Total. Add lines 1a-1f	<u></u>		042,992.			
	•	_			Business Code				
Program Service Revenue	2	a b							
Ser		c							
an		d							
Ba		ē							
Pr		f	All other program service reve	enue					
		g							
	3		Investment income (including						
			other similar amounts)		►	781.			781.
	4		Income from investment of ta	x-exempt bond p	proceeds 🕨 🕨				
	5		Royalties		►				
				(i) Real	(ii) Personal				
			Gross rents						
			Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss) . Gross amount from sales of	(i) Securities					
	'	a	assets other than inventory	1,606.	(ii) Other				
		h	Less: cost or other basis						
		~	and sales expenses	0.					
		с	Gain or (loss)	4 6 4 6					
			Net gain or (loss)		>	1,606.			1,606.
Other Revenue			Gross income from fundraisin including \$ 324, 9	ig events (not					
Seve			contributions reported on line						
erF			Part IV, line 18		308,751.				
oth			Less: direct expenses		276,588.	20 1 6 2			20.162
-			Net income or (loss) from fund		····· ►	32,163.			32,163.
	9	а	Gross income from gaming a						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gan		>				
	10	a	Gross sales of inventory, less and allowances						
		b	Less: cost of goods sold						
			Net income or (loss) from sale		L				
		-	Miscellaneous Revenu		Business Code				
	11	а							
		b							
		с							
			All other revenue						
		е	Total. Add lines 11a-11d						24 554
43200	12		Total revenue. See instructions.		►	677,542.	0.	0.	
43200 11-07-	14								Form 990 (2014)

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Part IX Statement of Functional Expenses

BIG SKY YOUTH EMPOWERMENT PROJECT INC

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	93,192.	69,894.	11,649.	11,649.
6	trustees, and key employees Compensation not included above, to disqualified	55,152.	05,0540	11,019.	11,049.
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	180,490.	167,369.	10,520.	2,601.
8	Pension plan accruals and contributions (include		,		_,
-	section 401(k) and 403(b) employer contributions)	5,825.	5,072.	377.	376.
9	Other employee benefits	32,933.	28,764.	2,337.	1,832.
10	Payroll taxes	27,108.	22,591.	2,530.	1,987.
11	Fees for services (non-employees):				
а	Management				
	Legal				
	Accounting	3,883.		3,883.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A) amount, list line 11g expenses on Sch 0.)		4 101	2 0 0 5	1 (04
12	Advertising and promotion	9,760.	4,191. 23.	3,885.	1,684. 5,451.
13	Office expenses	10,731.	<i>43</i> .	5,257.	5,451.
14	Information technology				
15	Royalties	7,809.	2,975.	3,141.	1,693.
16 17		1,005.	2,573.	5,111	1,055.
18	Travel Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	85.		85.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,153.		20,153.	
23	Insurance	19,187.	18,368.	819.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	IN KIND PROGRAM SUPPORT	163,768.	163,768.		
b	PROGRAM ACTIVITIES	62,501.	59,018.	72.	3,411.
c	VEHICLE EXPENSE	35,112.	31,472.	3,640.	-
d	YOUTH EXPENSE	13,474.	13,474.		
е	All other expenses	64,510.	32,733.	10,739.	21,038.
25	Total functional expenses. Add lines 1 through 24e	750,521.	619,712.	79,087.	51,722.
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 Figure if following SOP 98-2 (ASC 958-720)				

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Form **990** (2014)

547,515.

557,308.

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BIG SKY YOUTH EMPOWERMENT PROJECT INC Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X

(B) End of year

475,099. 477,171.

Form 990 (2014)

(A)

Beginning of year

				beginning of year		End of year
1	Cash - non-interest-bearing			434,444.	1	361,077.
2	Savings and temporary cash investments		F	13,510.	2	7,798.
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net				4	5,000.
5	Loans and other receivables from current and for					
	trustees, key employees, and highest compensi					
	Part II of Schedule L				5	
6	Loans and other receivables from other disqual					
	section 4958(f)(1)), persons described in section	-				
	employers and sponsoring organizations of sec					
	employees' beneficiary organizations (see instr)		-		6	
7	Notes and loans receivable, net		F		7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges				9	
10a	Land, buildings, and equipment: cost or other		Γ			
	basis. Complete Part VI of Schedule D	10a	142,958.			
b	Less: accumulated depreciation		87,739.	63,669.	10c	55,219.
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line			45,685.	12	48,077.
13	Investments - program-related. See Part IV, line		13			
14	Intangible assets		14			
15	Other assets. See Part IV, line 11		F		15	
16	Total assets. Add lines 1 through 15 (must equ			557,308.	16	477,171.
17	Accounts payable and accrued expenses			9,793.	17	2,072.
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete				21	
22	Loans and other payables to current and forme	r office	rs, directors, trustees,			
	key employees, highest compensated employee	es, and	disqualified persons.			
	Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrela	ated th	rd parties		23	
24	Unsecured notes and loans payable to unrelate	d third	parties		24	
25	Other liabilities (including federal income tax, pa	ayables	to related third			
	parties, and other liabilities not included on lines	s 17-24	. Complete Part X of			
	Schedule D				25	
26	Total liabilities. Add lines 17 through 25			9,793.	26	2,072.
	Organizations that follow SFAS 117 (ASC 958	3), cheo	k here ▶ X and			
	complete lines 27 through 29, and lines 33 ar					
27	Unrestricted net assets			534,005.	27	467,301.
28	Temporarily restricted net assets			13,510.	28	7,798.
29			······		29	
1	Organizations that do not follow SFAS 117 (A	SC 95	B), check here ▶└──			
	and complete lines 30 through 34.					
30	Capital stock or trust principal, or current funds				30	ļ
31	Paid-in or capital surplus, or land, building, or ed				31	ļ
32	Retained earnings, endowment, accumulated in	ncome,	or other funds		32	475.000

Form 990 (2014)

Assets

Liabilities

Net Assets or Fund Balances

13090205 792194 141005

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

	990 (2014) BIG SKY YOUTH EMPOWERMENT PROJECT INC	81-054	13203	Pag	ge 12			
Par	t 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		<u>7,5</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,5 2,9				
3								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	54		15.			
5	Net unrealized gains (losses) on investments	5		5	63.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		. –					
	column (B))	10	47	5,0	99.			
Par	t 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: X Cash Cash Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d 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?		. 2 b		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,						
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the							
	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 in Sch							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit						
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000				

Form **990** (2014)

432012 11-07-14

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(Form	990	or	990-	ΕZ
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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.

2014
Open to Public Inspection

OMB No. 1545-0047

		of the Treasury nue Service			Attach to Form 990 or I					Inspection
				ion about Schedule A	(Form 990 or 990-EZ) and	its instruct	tions is at _W	ww.irs.gov/fc		-
Nam	e of 1	the organizati						~		identification number
					EMPOWERMENT					1-0543203
Pa					All organizations must co			e instruction	S.	
The o	organ				(For lines 1 through 11, o					
1		A church, co	nvention of ch	nurches, or association	on of churches describe	d in sectio	on 170(b)(1	I)(A)(i).		
2				tion 170(b)(1)(A)(ii). (
3		A hospital or	a cooperative	hospital service org	anization described in s	ection 170)(b)(1)(A)(i i	ii).		
4		A medical res	search organiz	zation operated in co	njunction with a hospita	l describe	d in sectio	n 170(b)(1)(A	.)(iii). Enter	the hospital's name,
		city, and stat	te:							
5		An organizat	ion operated f	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental	unit describ	bed in
		section 170	0 (b)(1)(A)(iv). (0	Complete Part II.)						
6		A federal, sta	ate, or local go	overnment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organizat	ion that norma	ally receives a substa	antial part of its support	from a gov	vernmental	unit or from	the general	public described in
		section 170((b)(1)(A)(vi). (C	Complete Part II.)						
8		A community	/ trust describ	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9	Х	An organizat	ion that norma	ally receives: (1) more	e than 33 1/3% of its sup	oport from	contributi	ons, member	ship fees, a	and gross receipts from
		activities rela	ated to its exer	mpt functions - subje	ct to certain exceptions	, and (2) no	o more tha	n 33 1/3% of	its support	t from gross investment
		income and u	unrelated busi	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	iired by the o	rganization	after June 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)						
10		An organizat	ion organized	and operated exclus	ively to test for public sa	afety. See	section 50)9(a)(4).		
11		An organizat	ion organized	and operated exclus	ively for the benefit of, t	o perform	the function	ons of, or to c	arry out the	e purposes of one or
		more publicly	y supported or	rganizations describe	ed in section 509(a)(1) c	or section	509(a)(2).	See section	509(a)(3). (Check the box in
	_	_lines 11a thro	ough 11d that	describes the type of	of supporting organization	on and con	nplete lines	s 11e, 11f, an	d 11g.	
а		☐ Type I. A s	supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	y giving
		the suppor	rted organizati	on(s) the power to re	gularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting
	_	organizatio	on. You must o	complete Part IV, Se	ections A and B.					
b		Type II. As	supporting org	ganization supervised	d or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	iving
		control or r	management o	of the supporting org	anization vested in the s	same perso	ons that co	ontrol or mana	age the sup	ported
	_	organizatio	on(s). You mus	st complete Part IV,	Sections A and C.					
С		Type III fui	nctionally inte	egrated. A supportin	g organization operated	in connec	tion with, a	and functiona	Illy integrate	ed with,
		_ its support	ed organizatio	on(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III no	on-functionall	y integrated. A supp	porting organization oper	rated in co	nnection v	vith its suppo	rted organi	zation(s)
		that is not	functionally in	tegrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requiremer	nt (see instruct	tions). You must cor	nplete Part IV, Section	s A and D,	, and Part	V.		
е					written determination fro			а Туре I, Туре	e II, Type III	
					onally integrated support	ing organi	zation.			
		er the number								
g		vide the follow (i) Name of supp	<u> </u>	n about the supporte	ed organization(s). (iii) Type of organization	(iv) is the o	organization	(w) Amount o	fmonoton	(vi) Amount of
	(organizatior			(described on lines 1-9	listed	in your	(v) Amount o support	-	other support (see
		- g			above or IRC section	-	document?	Instruct		Instructions)
					(see instructions))	Yes	No		,	,
							L			

Total LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2014

Form 990 or 990-EZ. 432021 09-17-14

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Schedule A (Form 990 or 990-EZ) 2014

-	5	10	a	
	P	ar	t	Π

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is fo	r the organization':	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
_	organization, check this box and sto						
	ction C. Computation of Pub					, <u>,</u>	
	Public support percentage for 2014 (14	%
	Public support percentage from 2013					15	%
16 a	33 1/3% support test - 2014. If the	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	nore, check this k	
	stop here. The organization qualifies		•				
b	33 1/3% support test - 2013. If the	-					
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			•	•	•	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	st - 2013. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 i	s 10% or
	more, and if the organization meets t						ie 👘
	organization meets the "facts-and-cir		-				
18	Private foundation. If the organization	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17			ns ►

chedule A (Form 990 or 990-EZ) 2014

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Schedule A (Form 990 or 990-EZ) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	365,615.	470,400.	488,994.	799,421.	642,992.	2,767,422.
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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	365,615.	470,400.	488,994.	799,421.	642,992.	2,767,422.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		55,910.	42,390.	61,920.	24,158.	184,378.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
~	Add lines 7a and 7b		55,910.	42,390.	61,920.	24,158.	184,378.
	Public support (Subtract line 7c from line 6.)			12,0000	01/0200		2,583,044.
	tion B. Total Support						_,
	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6	365,615.	470,400.	488,994.	799,421.	642,992.	2,767,422.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			45.	531.	781.	1,357.
b	Unrelated business taxable income						<u> </u>
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b			45.	531.	781.	1,357.
	Net income from unrelated business activities not included in 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		470,400.				2,768,779.
14	First five years. If the Form 990 is for	the organization's	s first, second, thin	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3) organiz	ation,
	ction C. Computation of Publ						0.2 0.0
	Public support percentage for 2014 (15	93.29 %
	Public support percentage from 2013					16	93.38 %
	ction D. Computation of Investion		•				
	Investment income percentage for 20		., ,	ie 13, column (f))		17	.05 %
	Investment income percentage from 2					18	.02 %
19a	33 1/3% support tests - 2014. If the	-					
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2013. If the	•					
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th			
43202	23 09-17-14			15	Sch	edule A (Form 990) or 990-EZ) 2014

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Schedule A (Form 990 or 990-EZ) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 4

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *Part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in *Part VI* when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in *Part VI* what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and *if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer* (*b*) *below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2014

16

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Yes

No

Schedule A (Form 990 or 990 EZ) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 5

Fai	Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		
	below, the governing body of a supported organization?		
	A family member of a person described in (a) above?		
	A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in Part VI. 11c		
Sec	tion B. Type I Supporting Organizations	Vee	Na
-	Did the directory tructory or membership of one or more supported examinations have the power to	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		
2	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.		
Sec	tion 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).		
Sec	tion D. 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, (1) a written notice describing the type and amount of support provided during the prior tax		
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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).		
3	By reason of the relationship described in (2), 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		
Sec	tion 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. <i>Complete line 3 below</i> .)	
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction		
2	Activities Test. Answer (a) and (b) below.	Yes	No
а	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.		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	-	
b	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.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
з а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
a	trustees of each of the supported organizations? Provide details in <i>Part VI.</i> 3a		
b			
5	of its supported organizations? If "Yes," describe in $P_{art VI}$ the role played by the organization in this regard. 3b		
43202	5 09-17-14 Schedule A (Form 990 or 9)90-E7	2014
	17		, _0 , r

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Schedule A (Form 990 or 990-EZ) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 6

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. S

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

Section	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	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	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
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-functional	-	ated Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2014

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Par	t V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations _(continued)								
Secti	on D - Distributions		· · ·	Current Year							
1	Amounts paid to supported organizations to accomplish exempt purposes										
2	2 Amounts paid to perform activity that directly furthers exempt purposes of supported										
	organizations, in excess of income from activity										
3	Administrative expenses paid to accomplish exempt purpos										
4	Amounts paid to acquire exempt-use assets										
5	Qualified set-aside amounts (prior IRS approval required)										
6	Other distributions (describe in Part VI). See instructions.										
7	Total annual distributions. Add lines 1 through 6.										
8	Distributions to attentive supported organizations to which t	he organization is responsiv	е								
	(provide details in Part VI). See instructions.										
9	Distributable amount for 2014 from Section C, line 6										
10	Line 8 amount divided by Line 9 amount	_									
		(i)	(ii)	(iii)							
0		Excess Distributions	Underdistributions	Distributable							
Secti	on E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014							
1	Distributable amount for 2014 from Section C, line 6										
2	Underdistributions, if any, for years prior to 2014										
	(reasonable cause required-see instructions)										
3	Excess distributions carryover, if any, to 2014:										
а											
b											
с											
d											
е	From 2013										
f	Total of lines 3a through e										
g	Applied to underdistributions of prior years										
h	Applied to 2014 distributable amount										
i	Carryover from 2009 not applied (see instructions)										
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.										
4	Distributions for 2014 from Section D,										
	line 7: \$										
а	Applied to underdistributions of prior years										
b	Applied to 2014 distributable amount										
с	Remainder. Subtract lines 4a and 4b from 4.										
5	Remaining underdistributions for years prior to 2014, if										
	any. Subtract lines 3g and 4a from line 2 (if amount										
	greater than zero, see instructions).										
6	Remaining underdistributions for 2014. Subtract lines 3h										
	and 4b from line 1 (if amount greater than zero, see										
	instructions).										
7	Excess distributions carryover to 2015. Add lines 3j										
	and 4c.										
8	Breakdown of line 7:										
а											
b											
с											
d	Excess from 2013										
е	Excess from 2014										

Schedule A (Form 990 or 990-EZ) 2014

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Schedule A	(Form 990 or 990-EZ) 2014	BIG	SKY	YOUTH	EMPOWERMENT	PROJECT	INC	81-0543203	Page 8
Part VI	Supplemental Infor	matior	1. Provid	le the explai	nations required by Part	II, line 10; Part II	, line 17a	or 17b; and Part III, line 1	2.

1	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.	
	Also complete this part for any additional information. (See instructions).	

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SCHEDULE D)
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(Form	990)	
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Supplemental Financial Statements ► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form9900



Department of the Treasury Internal Revenue Service

Nam	e of the organization BIG SKY YOUTH EMPOWERMENT PROJECT INC	Employer identification number 81-0543203
Pa		
	organization answered "Yes" to Form 990, Part IV, line 6.	
	· · · · · · · · · · · · · · · · · · ·	(b) Funds and other accounts
4		
1	Total number at end of year	
2		
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 fu	
~	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	,
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	
Pa	impermissible private benefit? t II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	, iiie 7.
•	Preservation of land for public use (e.g., recreation or education)	v important land area
	Protection of natural habitat	• •
	Preservation of open space	
0		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.	Held at the End of the Tax Year
2	Total number of conservation easements	2a
a b	Total number of conservation easements Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	20 2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
u	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the orga	
U	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, and enforcing conservation easements during	······
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(
-	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
-	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	
	conservation easements.	
Pa	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance o	f 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 SFAS 116 (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 se	
	relating to these items:	, <u></u>
	(i) Revenue included in 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	
-	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	, provido
а	Revenue included in Form 990, Part VIII, line 1	► \$
b	Assets included in Form 990, Part X	
5		🚩 Ψ

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

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Partial Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Jung the organization acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check at that apply): a Dyble celluition d Loan or exchange programs b Scholarly research e Other c Dresearch of nuture generations o Other No c Dresearch assets o Other No c Dresearch assets o Other No e Dotation for future generations and explain how they further the organization sexempt purpose in Part XIII. String the year. did the organization accelection? Yes No PartIV Escrow and Custodial Arrangements. Complete the following table: Yes No b if Yes, "explain the arrangement in Part XIII and complete the following table: Yes No b If Yes," explain the arrangement in Part XIII and complete the following table: Yes No b If Yes," explain the arrangement in Part XIII and complete the following table: Yes No f Ending balance id Id Id Id			YOUTH EMP						31-05			age 2
clock at that apply: d Loan or exchange programs a Police schedular e Other	Par	- J										
a Public achibition d L Can or exchange programs b Scholary presenth e Other	3	Using the organization's acquisition, access	ion, and other record	ds, check a	any of t	he following that	at are a sig	gnificant ι	use of its	collectio	n item	S
b Scholary research 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 solid the organization answered "Yes" to Form 990, Part IV, line 9, or respondent an agent, trustee, custodian or other intermediary for contributions or other assets not included 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, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21. 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 Endowment Funds. Complet if the organization answered 'Yes' to Form 900, Part X, line 21. No b Of Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Intervent Bart Bart Bart Bart Bart Bart Bart Bar												
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection? Yes No. Part IVI Excorport and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part X, line 9.1. No 1a Is the organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. In a set organization angent, trustee, custodial arrangement in Part XIII and complete the following table: Amount c Beginning balance Intermediary for contributions or organization include an amount on Form 990, Part X, line 21, for secrow or custodial account liability? Yes No D the organization include an amount on Form 990, Part X, line 21, for secrow or custodial account liability? Yee No Berl V Endowment Funds. Complete if the organization answered 'Yes' to Form 990. Part X, line 10. Intermediary for part XIII. 1a Beginning of year balance (a) Current year (b) Por year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (f) Four years back (f) four years back	а	Public exhibition	c									
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization is collection? Part W Escrow and Custodial Arrangements. Complete if the organization asserted "Ves" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is diditions during the year Is dignination include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves 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 anowered "Yes" to Form 990, Part X, line 10. Part V Endowment Funds. Complete if the organization anowered "Yes" to Form 990, Part X, line 10. Is diverse the exitentiate provement \overlapse the diverse the adverse termings, gains, and losses Is doring the exitentiate explanation Is doring the exitentiate explanation Is doring the exitentiate explanation in the prosenization adverse termings, gains, and losses Is doring the exitentiate explanation in the organization's exempt that are held and administered for the organization by: Is doring the	b	Scholarly research	e	e 🗌 Ot	her							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets yes No Part V Escrow and Custodial Arrangements. Complete if the organization is collection? Yes To Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X Yes No Is the organization an agent. It sustee, 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:	с	-										
tops rold 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' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. for escrow or custodial account labibity? Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Int organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Int organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Int organization include an amount on Form 990, Part X, line 21. for escrow or custodial account labibity? Int organization include an amount on Form 990, Part X, line 20. for m990, Part X, line 10. Part due to the anagement in Part XIII. Check here if the esclanation has been provided in Part XIII Int organ	4								se in Par	XIII.		
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21. Amount Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21. for escrow or custodial account itability? Ves No b If "Yes," explain the arrangement in Part XII. Complete if the organization answered "Yes" to Form 990, Part X, line 21. for escrow or custodial account itability? Ves No b If "Yes," explain the arrangement in Part XII. Contributions Image: Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Four years back fo	5									7		-
reported an amount on Form 990, Part X, line 21. Image: Control of the intermediary for contributions or other assets not included 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, line 21. (or example to the following table: Image: Control other intermediary for contributions or other assets not included on Form 990, Part X, line 21. (or example to the organization include an amount on Form 990, Part X, line 21. (or escrew or custodial account liability?) Image: Control other intermediary for Control other intermediary for Control other intermediary in 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 "Ves" to Form 990, Part X, line 10. Part V Endowment Funds. Complete if the organization answered "Ves" to Form 990, Part X, line 10. Ta Beginning of year balance (a) Current year (b) Prior year (c) Two years back (a) Current year (b) Prior year (c) Two years back (b) Four years back Bead designated or quasi-administration explores												No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X7 Yes No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount 1c Amount c Beginning balance 1c 1d 1d 1d 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. Pert V Fordowment Funds. Complete if the organization answered 'Yes' to Form 900, Part IX, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (b) Prior year (c) Two years back (d) (d) Three years back (e) Four years back 1a Beginning of year balance (e) Ourrent year (b) Prior year (c) Two years back (e) Four years back 1a Grants or scholarships (a) Controbution	Par			ete if the o	rganiza	ation answered	"Yes" to I	orm 990,	, Part IV, I	ine 9, or		
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 1d d Additions during the year 1d e Distributions during the year 1d 2 Didthorganization 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' to Form 990, Part IX, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back if a durin stack for ansistic stack if a durin stack i												
b If "Yes," explain the arrangement in Part XIII and complete the following table:	1a									7		٦
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c Beginning balance ic id id id	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing tab	ole:							
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f Ending balance												
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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" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (c) Two years back (d) Three years back (e) Four years back c Other expenditures for facilities (a)	T							·				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (e) Four years back d Grants or scholarships (a) Current year (b) Prior year (c) Two years back (e) Four years back e Other expenditures for facilities (a) Current year (b) Prior year (c) Two years back (c) Two years back g End of year balance (in elittics (c) Two years back (c) Two years back (c) Two years back g End of year balance (in elittics (c) Two years back (c) Two years back (c) Two years back g End of year balance (in elittics (c) Two years back (c) Two years back (c) Two years back <th></th> <th>-</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>ty?</th> <th>L</th> <th>⊥ ¥es</th> <th></th> <th>] NO</th>		-						ty?	L	⊥ ¥es] NO
a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (c) Tw								<u></u>				<u></u>
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 Image: State of	1 41								oare back	(a) Four	Veare	hack
b Contributions	10	Paginning of year balance	(a) Current year	(b) Pho	or year	(C) 100 yea	IS DALK (Cais Dack	(e) i oui	years	Dauk
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 Temporarily restricted endowment ▶ % b Permanent endowment ▶ % the percentages in 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: (i) unrelated organizations (ii) related organizations b f A dualidings, and Equipment. Complete if the organization issed as required on Schedule R? 4 4 Description of property (a) Cost or other b b Description of property (a) Cost or other b b b b b b b c Leasehold improvements Land b b b b b c Leasehold improvements Land b												
d Grants or scholarships	U O											
e Other expenditures for facilities and programs	с d											
and programs												
f Administrative expenses	e											
g End of year balance	f											
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 Temporarily restricted endowment ▶% mthe percentages in lines 2a, 2b, and 2c should equal 100%. 3a A re there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes (i) unrelated organizations 3a(i) (ii) related organizations 3a(i) (iii) related organizations 3a(i) b If "Yes" to 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated b Buildings 4 578 • 2 , 238 • 2 , 340 • 4 , 578 • 2 , 238 • 2 , 340 • 4 , 578 • 2 , 238 • 2 , 340 • 4 , 578 • 2 , 238 • 5 , 501 • 52 , 879 • 2 , 000 • 52 , 879 • 5 e Other 138 , 380 • 85 , 501 • 52 , 879 • 5												
a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Temporarily restricted endowment ▶% The percentages in 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:	-			l ce (line 1a	colum	n (a)) held as:						
b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in 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:					oolann	(u)) noid do.						
c Temporarily restricted endowment ▶% The percentages in 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:		-	%									
The percentages in 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: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) additions (iii) related organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Part VI Land, Buildings, and Equipment. (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value Buildings (c) Leasehold improvements (c) Association (c) Leasehold improvements (c) Association (c) Association (c) Association (c) Leasehold improvements (c) Association (c) Assoc		· · · · · · · · · · · · · · · · · · ·										
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No by: (i) unrelated organizations 3a(i)	-											
by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements c Leasehold improvements d Equipment e Other (b) Cost (c) Accumulated (c) Book value (c) Book value (c) Accumulated (c) Book value (c) Book	3a			ation that a	are hel	d and administe	ered for th	ne organiz	ation			
(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 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. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation b Buildings 4 578 • 2 , 238 • 2 , 340 • 4 , 578 • 2 , 238 • 2 , 340 • 4 , 578 • 2 , 238 • 2 , 340 • 5 , 501 • 5 2 , 879 • 6 Other			Ũ					U		Ī	Yes	No
(ii) related organizations 3a(ii) b If "Yes" to 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other b basis (investment) b Buildings c Leasehold improvements d Equipment e Other		(i) unrelated organizations								3a(i)		
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" to 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 1a Land		2005 I.								3a(ii)		
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to 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 1a Land	b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Schedul	le R?					3b		
Complete if the organization answered "Yes" to 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	4	Describe in Part XIII the intended uses of the	e organization's ende	owment fur	nds.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	Par	t VI Land, Buildings, and Equipm	nent.									
the set of		Complete if the organization answere	d "Yes" to Form 990), Part IV, li	ne 11a	. See Form 990), Part X, I	ine 10.				
b Buildings 4,578. 2,238. 2,340. c Leasehold improvements 138,380. 85,501. 52,879. e Other		Description of property							d	(d) Bool	k value	э
b Buildings 4,578. 2,238. 2,340. c Leasehold improvements 138,380. 85,501. 52,879. e Other	1a	Land										
c Leasehold improvements 4,578. 2,238. 2,340. d Equipment 138,380. 85,501. 52,879. e Other												
e Other												
	d	Equipment			1	L38, <u>380</u> .		85,50)1.	5	2,8	79.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)												
	Tota	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column	(B), lin	e 10c.)				5	5,2	19.

Schedule D (Form 990) 2014

432052 10-01-14

Schedule D) (Form 990) 2014	BIG	SKY YOU	ΤН	EMPOWERMEN	IТ	PROJECT	INC	81	-0543203	Page 3
Part VII	Investments -	Other Se	ecurities.								
	Complete if the org	ganization a	nswered "Yes"	to Fo	orm 990, Part IV, line	11b.	See Form 990,	Part X,	line 12.		
(a) Descrip	otion of security or cate	gory (including	name of security)		(b) Book value		(c) Method of	valuatio	n: Cost or end	l-of-year market	value
(1) Financi	al derivatives										
	-held equity interests										
(3) Other											
	JTUAL FUNDS	5			48,077.		END-OF-Y	ZEAR	MARKET	VALUE	
(B)											
(C)											
(D)											
(E)											
(F)											
(G)											
(H)											
	b) must equal Form 990	0 Dart X col	(B) line 12)		48,077.						
	Investments -				40,0770						
	-	-					0	Dent V	line 10		
	(a) Description of				orm 990, Part IV, line (b) Book value	11C. 1				l-of-year market	valuo
	(a) Description of	Investment			(b) DOOK Value	-		valuatio	n. Cost of end	-or-year market	value
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
Total. (Col. (b) must equal Form 990	0, Part X, col.	. (B) line 13.) 🕨								
Part IX	Other Assets.										
	Complete if the org	ganization a			orm 990, Part IV, line	11d.	See Form 990,	Part X,	line 15.		
			(a)	Desc	ription					(b) Book v	alue
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
	ımn (b) must equal Fe	orm 000 Dr	ort X col (P) lin	0.15)						
Part X	Other Liabilitie		art A, COI. (D) III	e 13.,	/						
TUITA			nowarad "Vaa"	to La	wm 000 Dart IV line	110	or 11f Coo For	~ 000 F	Dart V lina OF		
		escription o		IO FC	orm 990, Part IV, line [·] I		Book value	П 990, г Т	art A, inte 25.		
<u>1.</u>	. ,	escription	n nability			(D)	SOOK Value	-			
	leral income taxes							4			
(2)								4			
(3)								4			
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
,	ımn (b) must equal F	orm 990. Pa	art X, col. (B) lin	e 25.) ▶						
					text of the footnote to	o the	e organization's	financia	l statements	that reports the	
-					48 (ASC 740). Check		-			-	
					,					edule D (Form 9	
									0011		

Schedule D (Form 990) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
1 Total revenue, gains, and other support per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 1	
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	
c Recoveries of prior year grants 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	
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.)	
c Add lines 4a and 4b	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.	
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	
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	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	

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.

required to	Complete if the Information a BIG SKY sing Activities complete this par	sed funds through any of the followi	Form 9 5,000 or Fo and its PR ered "Y	990, P on Fo orm 99 <u>s instru</u> OJE (es" to vities.	art IV, lines 17, 18, rm 990-EZ, line 6a. 00-EZ. actions is at <u>www.irs.c</u> CT INC b Form 990, Part IV, I Check all that apply	or 19 gov/fc ine 1), or if the or <u>m 990.</u> Employer i 81 – 054	
 c Phone solici d In-person so 2 a Did the organization key employees list b If "Yes," list the tere compensated at lease 	email solicitations tations on have a written o red in Form 990, P n highest paid ind past \$5,000 by the	s f Solicita g Special or oral agreement with any individua Part VII) or entity in connection with p lividuals or entities (fundraisers) pure	tion of fundra (inclue profess uant to	gover aising ding o ional 1 o agre	fficers, directors, tru fundraising services? ements under which	the 1	fundraiser is Amount paid	
(i) Name and addres or entity (fund		(ii) Activity	or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	l .	or retained b fundraiser ted in col. (i)	(or retained by)
			Yes	No	-			
Total			1	•				
3 List all states in wh or licensing.	ich the organizatio	on is registered or licensed to solicit	contrik	oution	s or has been notified	d it is	exempt from	n registration
LHA For Paperwork R	eduction Act Not	tice, see the Instructions for Form	990 or	· 990-l	EZ. S	Sche	dule G (Forn	n 990 or 990-EZ) 2014
432081		,						, _ - · ·

402001	
08-28-14	ļ

Schedule G (Form 990 or 990-EZ) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gr	oss income on Form 990 (a) Event #1	D-EZ, lines 1 and 6b. List e	events with gross receip (c) Other events	
			SPRING	(-)	(-)	(d) Total events (add col. (a) through
			RUNOFF	BINGO	4	col. (c)
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	442,025.	44,800.	146,902.	633,727.
	2	Less: Contributions	181,269.	34,900.	108,807.	324,976.
	3	Gross income (line 1 minus line 2)	260,756.	9,900.	38,095.	308,751.
	4	Cash prizes				
	5	Noncash prizes	76,432.	9,983.	37,162.	123,577.
Direct Expenses	6	Rent/facility costs	4,597.	1,107.	2,609.	8,313.
ect Ex	7	Food and beverages	23,388.	168.		23,556.
Dir	8	Entertainment				
	9	Other direct expenses	113,310.	3,522.	4,310.	
		Direct expense summary. Add lines 4 through				276,588.
Pa	11 rt	Net income summary. Subtract line 10 from I II Gaming. Complete if the organization		990 Part IV line 19 or r		32,163.
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Reve						
ш —	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)			

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

Net gaming income summary. Subtract line 7 from line 1, column (d)

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 L **b** If "Yes," explain:

432082 08-28-14

8

Schedule G (Form 990 or 990-EZ) 2014

_ No

36

Sch	edule G (Form 990 or 990 EZ) 2014 BIG SKY YOUTH EMPOWERMENT PROJECT INC 81-0543203 Page 3
	Does the organization conduct gaming activities with nonmembers?
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?
	Indicate the percentage of gaming activity conducted in:
	The organization's facility 13a %
	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
	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 $ ightarrow$ \$
С	If "Yes," enter name and address of the third party:
	Nama N
	Name
	Address
16	Gaming manager information:
	Name
	Gaming manager compensation 🕨 \$
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandatory distributions:
	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
_	organization's own exempt activities during the tax year 🕨 \$
Pa	rt 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).
43208	33 08-28-14 Schedule G (Form 990 or 990-EZ) 2014
	37 37 2014 05060 DTC CKY VOUTU ENDOWEDNENT D 141005 1

13090205 792194 141005 2014.05060 BIG SKY YOUTH EMPOWERMENT P 141005_1

Schedule G	(Form 990 or 990-EZ) Supplemental Infor	BIG	SKY	YOUTH	EMPOWERMENT	PROJECT	INC	81-0543203	Page 4
Part IV	Supplemental Infor	rmation	(contin	ued)					
432084 05-01-14							Scl	nedule G (Form 990 or	990-EZ)
ບວ-ປ I-14					38				

13090205 792194 141005 2014.05060 BIG SKY YOUTH EMPOWERMENT P 141005_1

SCHEDULE	Μ
(Earm 990)	

Noncash Contributions

OMB No. 1545-0047

4

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

0. Inspection

Open To Public

20

Name of the organization						-	Employer identification number
	BIG	SKY	YOUTH	EMPOWERMENT	PROJECT	INC	81-0543203
Part I Types of P	ropert	v					

Fai						·			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash conti amounts repo Form 990, Part V	rted on	(d) Method of de noncash contribu	eterminiı		s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8									
9	Intellectual property								
	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 (PROGRAM SUPPO)	Х	31	163,		FMV			
26	Other (SPECIAL EVENT)	Х	138	100,	384.	FMV			
27	Other 🕨 (
28	Other 🕨 (
29	Number of Forms 8283 received by the organiz	zation durin	g the tax year for c	ontributions					
	for which the organization completed Form 828	33, Part IV,	Donee Acknowledg	gement	29				
								Yes	No
30a	During the year, did the organization receive by	/ contributio	on any property rep	oorted in Part I, lin	es 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	l which is not requ	uired to be	used for			
	exempt purposes for the entire holding period?								Х
b									
31	Does the organization have a gift acceptance p	olicv that r	eauires the review	of any non-standa	ard contrib	utions?	31		Х
									х
b									
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which colur	nn (a) is cł	necked			
	describe in Part II.								
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0		Schedule M	(Form (990) (2014)

432141 08-12-14

13090205 792194 141005

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.

SCHEDULE M, PART I, COLUMN (B):

EXPLANATION: REPORTING THE NUMBER OF CONTRIBUTIONS

Schedule M (Form 990) (2014)

432142 08-12-14

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www. irs. gov/fit	ZU14 Open to Public
Name of the organization BIG SKY YOUTH EMPOWERMENT PROJECT INC	Employer identification number 81-0543203
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS SELF RELIANCE, CRITICAL THINKING SKILLS, AND COMMUNITY PAT THROUGHOUT GALLATIN COUNTY, MONTANA.	
FORM 990, PART VI, SECTION B, LINE 11: A DRAFT COPY IS PRESENTED TO THE BOARD OF DIRECTORS FOR T APPROVAL BEFORE FILING.	HEIR REVIEW AND
FORM 990, PART VI, SECTION B, LINE 12C: THE POLICY IS REVIEWED ANNUALLY.	
	TIVE COMMITTEE
MAKES RECOMMENDATION FOR ANNUAL COMPENSATION TO THE FULL :	
AT THE ANNUAL MEETING OF THE BOARD OF DIRECTORS WHERE THE DIRECTOR IS NOT PRESENT	
FORM 990, PART VI, SECTION C, LINE 19: THE DOCUMENTS ARE AVAILABLE UPON REQUEST.	

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2014)

 432211 08-27-14
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