** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax

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

Form 990 (2021)

Do not enter social security numbers on this form as it may be made public.

Open to Public

OMB No. 1545-0047

Department of the Treasu Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022 Check if applicable: C Name of organization D Employer identification number Address change AMERICAN INDIAN YOUTH RUNNING STRONG INC Name change Doing business as RUNNING STRONG FOR AMERICAN 54-1594578 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 8301 RICHMOND HIGHWAY 200 (703) 317-9881 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 9,501,917.ALEXANDRIA, VA 22309 H(a) Is this a group return F Name and address of principal officer: BRYAN L. KRIZEK for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Vae I Tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ▶ WWW.INDIANYOUTH.ORG H(c) Group exemption number ► 3299 K Form of organization; X Corporation Trust **Association** Other > L Year of formation: 1990 M State of legal domicile; VA Part I Summary Briefly describe the organization's mission or most significant activities: WE GIVE AMERICAN INDIAN YOUTH AND THEIR FAMILIES THE TOOLS AND HOPE TO BUILD A BETTER LIFE. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 7 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) $\overline{11}$ 5 6 Total number of volunteers (estimate if necessary) 50 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 7,026,850. 9,073,591. 9 Program service revenue (Part VIII, line 2g) Ō. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 231,257. 83,632. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>36</u>,769. <u>49,9</u>08. 12 _Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 7,294,876. 9,207,131.13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,291,743. 4,333,430. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 699,481. 542,832. 16a Professional fundraising fees (Part IX, column (A), line 11e) Q. 0. b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,206,753. 1,071,995.18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 7,197,977. 5,948,257. 19 Revenue less expenses. Subtract line 18 from line 12 96,899. 3,258,874. 5 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 3,097,089. 5,781,858. 21 Total liabilities (Part X, line 26) 370,352. 200,816. Net assets or fund balances. Subtract line 21 from line 20 2,726,737. 5,581,042. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign BRYAN L. KRIZEK PRESIDENT/CEO Here Type or print name and title Print/Type preparer's name Preparer's signature Check PTIN AARON M. FOX Pald AARON M. FOX 11/15/22 P01365820 Firm's name MARCUM, LLP Preparer Firm's EIN 11-1986323 **Use Only** Firm's address > 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036 Phone no. (202) 227-4000 May the IRS discuss this return with the preparer shown above? See instructions X Yes

LHA For Paperwork Reduction Act Notice, see the separate instructions.

P	art III Statement of Program Service Accomplishments
	Check if Schedula O contains a vacantains
1	Check if Schedule O contains a response or note to any line in this Part III
•	Briefly describe the organization's mission:
	TO HELP AMERICAN INDIAN PEOPLE MEET THEIR IMMEDIATE SURVIVAL NEEDS OF
	FOOD, WATER, AND SHELTER WHILE IMPLEMENTING AND SUPPORTING PROGRAMS
	DESIGNED TO CREATE OPPORTUNITIES FOR SELF-SUFFICIENCY AND SPIE FOREM
_	ESTECIALDI FOR NATIVE YOUTH.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	ii Tes, describe triese new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	" res, describe trese 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	
	TANDLAN PROPERTY REPORT OF THE RIDGE AND CHEYENNE RIVER SIOUX
	ARIZONA MENOMINER INDIAN RECEDIATION IN
	ARIZONA, MENOMINEE INDIAN RESERVATION IN WISCONSIN AND OTHER NATIVE
	COMMUNITIES NATIONWIDE). ALL CHILDREN NEED TO HAVE ACCESS TO HEALTHY FOOD TO GROW AND THRIVE. IMPOVERISHED ECONOMIC REALTITIES OF BURNLAND
	TOOK TO GROW AND INKIVE. IMPOVERISHED ECONOMIC DESITEMES OF DIDER AND
	MUDERVATION LIFE CHALLENGE MANY AMERICAN INDIAN COMMUNITIES TO MEET
	THEIR CHIEDREN S DASIC NEEDS. RUNNING STRONG IS DEDICAMED MO
	SUPPORTING NATIVE COMMUNITY LEADERS AND FAMILY'S EFFORTS TO ENGINE THAT
	THEIR CHILDREN HAVE A HEALTHY START.
	(SEE SCHEDULE O FOR CONTINUATION)
b	(Code:) (Expenses \$ 2,420,721. Including grants of \$ 1,788,778) (Converse
	(Code:) (Expenses \$2, 420, 721. Including grants of \$1, 788, 778.) (Revenue \$) YOUTH, LANGUAGE AND CULTURE - (PINE PINCE AND NAMED N
	RESERVATIONS IN SOUTH DAKOTA, AND OTHER NATIVE COMMUNITIES NATIONWIDE).
	RUNNING STRONG WHOLEHEARTEDLY ADVOCATES FOR NATIVE YOUTH PROSPERITY AND
	MCADEMIC SUCCESS. WE SUPPORTED THE LONG-FERM WORK DECUTED BY MITE
	DIVISION OF INDIAN WORK, WHOSE SPECIFIC ACTIVITIES WERE ACADEMIC
	BOFFORT TO ENCOURAGE YOUTH TO SUCCEED IN SCHOOL AND IN THE COMMITTEE
	TEACHING YOUTH HOW AMERICAN INDIAN CULTURE AND LIFE SKILLS CAN BE HERD
	THE PERIL OF MEASURES AGAINST ALCOHOL TORACCO AND DDIG ADVICE
	WAUNIAWAPI TO HELP YOUTH IMPROVE THEIR DEADING AND LITTIDE GIL CHIEF
	NIIBIN MINWEDAAGWAD WHICH PROVIDED CULTURAL TEACHINGS AND RECREATIONAL
	ACTIVITIES (ESTIMATED 15 FAMILIES AND 50 CHILDREN SERVED).
	(SEE SCHEDULE O FOR CONTINUATION)
,	(Code:) (Expenses \$ 306,512. Including grants of \$ 225,863.) (Revenue \$)
	DREAMSTARTER PROGRAM - DREAMSTARTER, DREAMSTARTER TEACHER, DREAMSTARTER
	CREATIVE, DREAMSTARTER SCHOLARSHIP, KEEP THE DREAM ALIVE.
:	IN HIS TRAVELS THROUGHOUT THE NATION, OUR SPOKESPERSON BILLY MILLS HAS
	TIMEDOED THE LADES A POVERTY OF DEFAME THE TREE STREET STREET
- 4	NOT DAKE TO DREAM. DREAMSTARTER ATMS TO SHIDDODD MADITED MOTION TAX DESCRIPTION
i	MENTORSHIP, COMMUNICATIONS TRAINING AND WHENCEL SUPPORT, HANDS-ON
i	MENTORSHIP, COMMUNICATIONS TRAINING, AND NETWORKING. RUNNING STRONG
ī	RECOGNIZES THAT TODAY'S NATIVE YOUTH ARE OUR FUTURE LEADERS AND DESPITE
- 4	THE SERVE CHARLEMOND THAT WATTAK YOUTH FACK, WE CAN UPID THEM POSTOW
- 4	THEIR DREAMS.
_	SEE SCHEDULE O FOR CONTINUATION)
C	Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Resease \$
	otal program service expenses 5,874,004.
2 1	Form 990 (2021)
'	SEE SCHEDULE O FOR CONTINUATION(S)

	1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Ye	s No
	If "Yes," complete Schedule A		١	
:	if "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect as little and a little	1		
;	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u> 2</u>	X	+-
	public office? If "Yes," complete Schedule C, Part I Section 501(cN3) organizations. Did the executable control of the complete schedule C.			1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection in	<u> 3</u>	┼—	X
	during the tax year? If "Yes," complete Schedule C, Part II	t		١
ŧ	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	┿	X
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III			l
€	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5	+	X
	provide advice on the distribution or investment of amounts in such funds or accounts? If *Yes, * complete Schedule D, Part	-		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	┼—	<u> </u>
	the environment, historic land areas, or historic structures?		17.	
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7	╄	X
	Schedule D. Part III		1 .	1
9	Schedule D, Part III	8	3	X
-	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	1	18	
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		1	
10	If "Yes," complete Schedule D, Part IV	9	<u>↓ </u>	X
	and organization, directly of thiough a related organization, hold assets in donor-restricted endowments		1	
11	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
•••	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.		Small	100
			100	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Pan VI	11a	X _o	
	and an experience of the total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
•	- 13 that is 5% or more of the total			
	assets reported in Part X, line 167 /f "Yes," complete Schedule D, Part VIII	110		X
•	. Size the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	The the organization report an amount for other liabilities in Part X, line 25? If "Yes " complete Schedule D. Port V	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tay year include a footpote that addresses			
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	х	
128	bid the organization obtain separate, independent audited financial statements for the tax year? If "Yes " complete			
	Schedule D, Parts XI and XII	12a	x	
D	was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	ı
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule F	13	\neg	X
14a	bid the organization maintain an office, employees, or agents outside of the United States?	14a	$\neg \uparrow$	X
b	and the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business		\neg	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more r if "Yes," complete Schedule F, Parts I and IV	14b		X
15	The trie 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	- 1	X
6	and organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		\neg	
_	or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV	16		X
7	The title organization report a total of more (nan \$15,000 of expenses for professional fundraising sendoes on Day IV		\neg	
_	column (A), lines 6 and 11e? If "Yes," complete Schedule G. Part I. See instructions	17	1	X
8	the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines		\neg	
_	tc and 8a? If "Yes," complete Schedule G. Part II	18		X
9	**Vec *	- 	\dashv	
	complete Schedule G, Part III	19		x
0a	"The organization operate one or more nospital facilities? If "Yes " complete Schedule H	20a	-	X
_	" 193 to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	\dashv	
1	Did the organization report more than \$5,000 of grants or other assistance to any demestic organization or		\dashv	
_	comestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	x	
2003	12-09-21	Form §		021)
	4		15	"

-	artiv Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	_	Ye	8 1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		. "	.
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	: 22	2 X	⊹⊢
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	ı k	.
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		1 4	+
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	-		25
	Schedule K. If "No," go to line 252	244	.	- 2
- 1	belonds beyond a temporary period exception?	24	_	+
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeace			+
	any tax-exempt bonds?	240	,	1
•	of boilds outstanding at any time during the year?			1-
25	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess bonefit		1	1
	transaction with a disqualified person during the year? If "Yes." complete Schedule I Pert I	258	d .	l z
Ŀ	to the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year and		149	+
	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	33	ע ב
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current		1	
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		1	1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	1	x
27	a grant or other assistance to any current or former officer, director, trustee, key employee			+
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		i .	1
	entity (including an employee thereof) or family member of any of these persons? If "Yes " complete Schedule 1. Boot III	27		X
28	was the organization a party to a business transaction with one of the following parties (see the Schedule I. Part IV		5	138
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			119000
	"Yes," complete Schedule L, Part IV	28a	1] x
D	A family member of any individual described in line 288? If "Yes." complete Schedule I. Part IV	28b		X
C	A 30% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?			Т
20	"Yes," complete Schedule L, Part IV	28c		X
:9 10	the digalization receive more than \$25,000 in non-cash contributions? If "Yes " complete Schedule M	29	X	
	the organization receive contributions of art, historical treasures, or other similar assets, or qualified consequetion			П
11	contributions? If "Yes," complete Schedule M	30		X
2	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
_	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
3	Schedule N, Part II	32		X
•	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1	ľ	
4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
•	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1 .	ĺ	1
5a	Part V, line 1	34	X	
ь	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
_	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
В	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
7	If "Yes," complete Schedule R, Part V, line 2	36	_	X
	and that is treated as a partnership for federal income toy number 2. (1) and 15 not a related organization	ll		l
3	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	37		_X
arl	Statements Regarding Other IRS Filings and Tax Compliance	38	X	
	Check if Schedule O contains a response or note to any line in this Part V			_
	and to any should this Cart 4	1		<u> </u>
a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	inter the number of Forms W-2G included on time to Finance Visit to Visit III		1 3	
c I	Oid the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	100	A. J.	
	gambling) winnings to prize winners?	10000	1000	

132004 12-09-21

Form 990 (2021)

AMERICAN INDIAN YOUTH RUNNING STRONG INC 54-1594578 Statements Regarding Other IRS Filings and Tax Compliance (continued) Page 5 Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 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? X b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b If "Yes," enter the name of the foreign country See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ... 7a h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? X 15 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? X If "Yes," complete Form 4720, Schedule O.

activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any

If "Yes," complete Form 6069.

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

_	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction A. Governing Body and Management			41
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year	7	103	110
	If there are material differences in voting rights among members of the governing body, or if the governing	1000		Assis
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	200		
- 1	Enter the number of voting members included on line 1a, above, who are independent 1b	7	1846	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	SHAR
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		 ^	
	of officers dispeters to the second of the s		1	l .
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	_	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	ं द	_	X
6	Did the organization have members or stockholders?		_	X
78		6	_	_
	more members of the governing body?	1.		3,5
t	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	-7a	_	Х
	and the same of th	l		.
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	4000230	X
а	The governing body?	HO-CO.V.	1200	
ь	The governing body? Each committee with authority to act on behalf of the governing body?	8a	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8b		X
	organization's mailing address? If even a provide the page and address of the	1.		
Sec	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	1.0		
10a	Did the organization have local chapters, branches, or officiators		Yes	No
Ь	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		X
_	and branches to ensure their enceptions are appelled at the state of t	1 .	l	
11a	Has the organization provided a complete copy of this Form 000 to all respect to the purposes?	tOb		
ь	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	X	
12a	Did the organization have a written conflict of interest noting a very	100000		
b	a miles of interest policy! If No. go to line 13	12a	X	
	and the state of t	12b	X	
•	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1 1		
13	on Schedule O how this was done	12c	X	
14	Did the organization have a written whistleblower policy?	13	Х	
15	Did the organization have a written document retention and destruction policy?	14	X	
	Did the process for determining compensation of the following persons include a review and approval by independent		7.5	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45.00		
h	The organization's CEO, Executive Director, or top management official	15a	_	<u>x</u> _
	Other officers or key employees of the organization	15b		X
	The storage road of road, describe the process on Schedule O. See instructions.	200		
IVA	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	interest		Page 1
		16a		X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	2.5		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		4 4 4	6
eci	exempt status with respect to such arrangements?	16b		
17			_	
	List the states with which a copy of this Form 990 is required to be filed NAL, AR, CA, FL, GA, WA, IL, KS, KY	, MD ,	MA,I	<u> </u>
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only) a	vailable	9
	tor public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financi	al	
	statements available to the public during the tax year.			
:0	State the name, address, and telephone number of the person who possesses the organization's books and records			
	BIEU DO, CFO - (703) 317-9086 8301 RICHMOND HIGHWAY, SUITE 200 ALEXANDRIA VA 22209			
	The state of the s			_
2006	12-09-21 SEE SCHEDULE O FOR FULL LIST OF STATES	Form 9	90 (2	021)

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

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

Name and title	(B) Average hours per week (list any hours for related organizations	director 9 Q	x, unit	Po: check	mor erson	e than	one	(D) Reportable	(E) Reportable	(F) Estimated
	week (list any hours for related	director 9 Q	x, unit	939 pa	erson	e than	one			
	hours for related	director			UII GC	tor/tru	th an	compensation	compensation from related	amount of
	below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated	The state of the s	the	organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) BRYAN L. KRIZEK	3.00	+=	╀┺	ا م	╇	모든	1 12			
PRESIDENT/CEO	57.00	1		x	1		1		202 015	45 444
(2) PAUL E. KRIZEK, ESQ.	3.00	+	-	^	┢	╀╌	╀╴	0 •	292,015.	<u>45,698</u>
VICE PRESIDENT/GENERAL COUNSEL	32.00	1		X	ı		ı	0.	242 006	45 040
(3) BIRU DO	3.00	╫	╁	2	┞	┢	╂─		243,096.	45,349
CFO	57.00	1		X	ĺ	l	1	0.	120 227	16 000
(4) LAUREN HAAS FINKELSTEIN	57.00	一	┢	-	╌	+	\vdash	 0 • 	139,337.	16,202
EXECUTIVE DIRECTOR - UNTIL 10/2021	0.00	1	ľ	l		x		0.	116,461.	0 640
(5) JAMES J. O'BRIEN, ESQ	2.00					1	┢			9,648
CHAIRMAN	6.00	х		х			1	0.1	0.	0
(6) BLAYNE SILVERSMITH	2.00		П				┢			0.
TREASURER		X		X				ا.ه	0.	0.
(7) ASHLEY WAHIARONKWAS MORRIS	2.00									
SECRETARY	0.00	X		X				L 0.	0.	0.
(8) LORETTA AFRAID OF BEAR COOK	2.00					П				
DIRECTOR	0.00	X						0.1	0.	0.
(9) EMIL HER MANY HORSES	6.00			7						
DIRECTOR	0.00	X						0.	0.1	0.
(10) REAR ADMIRAL ERIC C. JONES	2.00		- 1	ı						
DIRECTOR		X						0.	0.	0.
(11) CLYDE B. RICHARDSON DIRECTOR	2.00		-							
TRECTOR	6.00	X	_	\perp	_			0.	0.	0.
	 	ı	-	1		- 1				
			7	T	7					
	 	\dashv	+	+	┪	+	\dashv			
		4	4	4	4	_	4			
		-	-	ľ	-		-		1	
 	——		\top	1	7	\dashv	7			
		+	+	+	\dagger	\dashv	+			

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Form 990 (2021)

_			Check if Schedule C	<i>,</i> (()	mailis a resp	ons	e ur note to any li r	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(O) Revenue excluded from tax under
\$	2	1 4	a Federated campaigns		1a	Г	58,366.	The state of the s	Mary and the same	22011030 70401106	sections 512 - 514
F. S.	뒭	ı	Membership dues		1b						
Contributions, Gifts, Grants	8	•	Fundraising events		1c						
		C	d Related organizations		1d	4	,994,408.				
Š.	易	•	Government grants (con				43,118.				
		Ť	All other contributions, gifts			_	000 000				
2	5		similar amounts not include Noncash contributions included in			3	<u>,977,699.</u>				
5			Total. Add lines 1a-1f		s 1a-1f [1g]	<u>\$</u> ⊥	,973,801.	0 072 501			
			Total Add inted 12-11		******		Business Code	9,073,591.			
æ		2 a	ı <u></u>							Service Control	
ž,	ė.	b	2			_	41.		194	56	
S S		C					*		7		
Program Service		d									
709	1	0									
•	l	f	All other program service	reve	eune						
	Η.	<u>9</u>	Total. Add lines 2a-2f			<u></u>					Burn Govern
	'	3	Investment income (included)					54 010			
	١,	4	other similar amounts) Income from investment of	 af ta	v.avamnt ba			54,019.			54,019.
		5	Royalties	n ra	x-exempt bo	na j	proceeds				
					(i) Real		(ii) Personal	The state of the s	A STATE OF THE PARTY OF THE PAR	7	
	•	3 a	Gross rents	6a			1,7,5				
		b		6b							
		C	Rental income or (loss)	6c							
			Net rental income or (loss)	(3	der Jack School (Second
	7	a	Gross amount from sales of	ı	(i) Securiti		(ii) Other			Committee State	The control of
			assets other than inventory	7 <u>a</u>	324,39	<u>9.</u>					
		Ь	Less: cost or other basis		h	_					
ᇍ		С	and sales expenses Gain or (loss)	7b	294, /8	<u>0.</u>					
Other Revenue			Net gain or (loss)					20 612			
盲	а	а	Gross income from fundraisin	un eu	ents (not	·····		29,613.			29,613.
튄	_	_	including \$								
			contributions reported on	line	1c). See		1				
			Don't B./ 15 40		·	8a					
-		b	Less: direct expenses			8ь					
-		C	Net income or (loss) from f	und	raising event	s			4.04.00		10/2004
- 1	9	a	Gross income from gaming	ac	tivities. See		100			128 A. Harrison &	ERENEWS:
			Part IV, line 19	••		9a					
- 1		D	Less: direct expenses			9b		and st			
- 1	10		Net income or (loss) from g								
- 1	10	a	Gross sales of inventory, le and allowances	ss r	etums				X KOLEYO E		TEN LIE NE
		ь	Less: cost of goods sold	• • • • • •		10a 10b					
		c i	Net income or (loss) from s	 alas	of inventory						
				<u></u>	- withinory	Ϊ	Business Code	1 St 100 - 100 E			With the second
2	11		SALE INCOME			- 1	900099	46,572.		N. A. Hallery of His	AC 572
Revenue		b į	APPLICATION FE	ES	3	<u> </u>	900099	2,335.			<u>46,572.</u> <u>2,335.</u>
8 8			MISCELLANEOUS			<u> </u>	900099	1,001.			$\frac{2,335.}{1,001.}$
24			All other revenue			_ [T,001.
			Total. Add lines 11a-11d					49,908.		9.00	1 -61-00 155
	12		Total revenue. See instruction	<u>s .</u>			▶ 9	,207,131.	0.	0. 1	33,540.
2009	12-0	09-21	I								orm 990 (2021)

D^	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(0)	/Pat
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	1 000 100			Marin Spix Til
_	and domestic governments. See Part IV, line 21	4,226,129.	4,226,129.		
2	Grants and other assistance to domestic	107 204	405 004		
•	individuals. See Part IV, line 22	107,301.	107,301.		
3	and the control of th]		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
9	Compensation of current officers, directors,			9	
6	trustees, and key employees				
Ų.	Compensation not included above to disqualified	3	100	-1.0	
	persons (as defined under section 4958(f)(1)) and	. M.C.	0.5	**	
7	persons described in section 4958(c)(3)(B)	421 042	424 040		
8	Other salaries and wages Pension plan accruals and contributions (include	431,842.	431,842.		<u> </u>
	section 401(k) and 403(b) employer contributions)	14 561	14 564		
9	Other employee benefits	14,561. 61,418.	14,561.		
0		35,011.	61,418.		
1	Payroll taxes Fees for services (nonemployees):	33,011.	35,011.		
a	Management		1		
ь		75			
	그 아이들은 내 전에 가는 것 같아. 이 그 없는 것 같아 하는 것 같아. 그렇게 되었다고 있다고 있다고 있다고 있다.	12,037.	18	10 000	
d	Lobbying	14,037.		12,037.	
-	Professional fundraising services. See Part IV, line 17		1577/01/15/15/15		
f	Investment management fees	5,863.		F 063	
9	Other. (If line 11g amount exceeds 10% of line 25,	3,003.		5,863.	
	column (A), amount, list line 11g expenses on Sch O.)	113,633.	107,703.	4 600	4 0-
2	Advertising and promotion	3,394.	3,394.	4,680.	1,25
- 3	Office expenses	92,917.	80,041.	2 070	0.70
4	Information technology	35,468.	30,553.	3,079.	9,79
5	Royalties	33,400.	30,333.	1,175.	3,74
	Occupancy	99,743.	86,651.	13 003	
7	Travei	117,192.	114,438.	13,092.	
3	Payments of travel or entertainment expenses		114,430.	2,754.	
	for any federal, state, or local public officials		1	1	
3	Conferences, conventions, and meetings	12,621.	12,324.	297.	
)	Interest		14,344.		
	Payments to affiliates				
2	Depreciation, depletion, and amortization	41,593.	41,593.		
	Insurance	28,678.	28,678.		
ŀ	Other expenses, Itemize expenses not covered	1	20,0701		
	above. (List miscellaneous expenses on line 24e, If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	D1 85 - 121 122			
a	PROCUREMENT FEES	323,610.	323,610.		
b	SHIPPING	127,916.	127,916.		
c	DUES/FEES/SUBSCRIPTIONS	40,784.	35,133.	1,351.	4,300
	BAD DEBT EXPENSE	10,838.		10,838.	=,300
e /	All other expenses	5,708.	5,708.		
	Total functional expenses. Add lines 1 through 24e	5,948,257.	5,874,004.	55,166.	19,087
	Joint costs. Complete this line only if the organization		, , , , , , , ,		15,00
	reported in column (B) joint costs from a combined				
	educational campaign and fundralsing solicitation.				
(heck here if following SOP 98-2 (ASC 958-720)				

art .				
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
	1 Cash - non-interest-bearing	523,485.	1 1	399,80
	2 Savings and temporary cash investments	76,718.	2	54,88
- 13	3 Pledges and grants receivable, net	52,120.	3	47,04
	Accounts receivable, net	1,267.	4	101,02
'	Loans and other receivables from any current or former officer, director,	The state of the state of the	5000	
	trustee, key employee, creator or founder, substantial contributor, or 35%			
1.	controlled entity or family member of any of these persons		5	
- '	Loans and other receivables from other disqualified persons (as defined			
١.	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		8	
2 7	The state of the s		7	
	1timenter and the second	17,891.	8	254,13
، ۱	Prepaid expenses and deferred charges	524.	9	
10	a Land, buildings, and equipment: cost or other	*		
-	basis. Complete Part VI of Schedule D 10a 3,181,422.		March 1	
١.,	b Less: accumulated depreciation 10b 194,500.	<u>196,897.</u>	10c	2,986,92
11	FEEDO, WELLOW COORDINGS	2,225,180.	11	1,935,53
12			12	
13	Program related Cool Brilly, MIG 11		13	
14			14	
15		3,007.	15	2,50
16		3,097,089.	16	5,781,85
17	F-7-55-5 E-10 GOS-1003	156,229.	17	134,42
18	***************************************	<u> </u>	18	
19	***************************************		19	
20	Account of the Control of the Contro		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	payments to any surrous of former, diffector,		THE R	
1	trustee, key employee, creator or founder, substantial contributor, or 35%			
1	controlled entity or family member of any of these persons	3 10 517(73)	22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third		- 1	
1	parties, and other liabilities not included on lines 17-24). Complete Part X		- 1	
	of Schedule D	214,123.		<u>66,39</u> 4
26	Total liabilities, Add lines 17 through 25	370,352.	26	200,816
1	Organizations that follow FASB ASC 958, check here			
	and complete lines 27, 28, 32, and 33.	Karabay ne second		
27	Net assets without donor restrictions	2,682,369.	27	<u>5,433,996</u>
28	Net assets with donor restrictions	44,368.	28	147,046
1	Organizations that do not follow FASB ASC 958, check here			
200	and complete lines 29 through 33.			
30	Capital stock or trust principal, or current funds		29	
1	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	
32	Total net assets or fund balances	2,726,737.	32	5,581,042
33	Total liabilities and net assets/fund balances	3,097,089.	33	5,781,858

	MERICAN INDIAN YOUTH RUNNING STRONG INC	54-15	94578	P	age 12
	Art 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 1			
2	Total expenses (must equal Part VIII, column (A), line 12)	1 -	9,20		
3	Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1	2	5,94		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	3	3,25		
5	Net unrealized gains (losses) on investments	4	2,72		
6	Net unrealized gains (losses) on investments Donated services and use of facilities	5	-40	4,5	69.
7	Donated services and use of facilities	6			-
8	Investment expenses Prior period adjustments	7			- X
9	Other phonons in not asset as	8			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	9			0.
	column (R))		5 5 0	4 4	
Pa	rt XII Financial Statements and Reporting	10	<u>5,58</u>	1,0	42.
	Check if Schedule O contains a response or note to any line in this Part XII				
	State of Secretaria a response of flote to any line in this Part All			*****	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		0.000	Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule		100		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		F-36-30		10000
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		. 2a	vici limit	X
	separate basis, consolidated basis, or both:	оп а		總	10 S
			1000		
ь	Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		0.2513	MED.	
_	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		2b	X	
	consolidated basis, or both:	basis,	100		
	Separate basis Consolidated basis X Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	***	3.750	DESCRIPTION OF THE PERSON OF T	50/01
Ť	review, or compilation of its financial statements and solection of an independent of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
3a	If the organization changed either its oversight process or selection process during the tax year, explain on Sche As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	dule O.	2423	1000	100
	Act and OMB Circular A-133?	le Audit			
b	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		3a		<u>X</u>
_	or audits, explain why on Schedule O and describe only stone taken to undergo the require	ed audit		ľ	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u>3b</u>		
			Form	990 (2021)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

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

AMERICAN INDIAN YOUTH RUNNING STRONG INC 54-1594578 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (IV) is the organization lister (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document organization (described on lines 1-10 support (see Instructions) Yes support (see instructions) No above (see instructions))

(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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and				1	(0, -02.	III Total
	membership fees received. (Do not]	
	include any "unusual grants.")	<u>525559</u> 8.	<u>437710</u> 1.	5406428.	7016850.	9073591.	31129568.
2	Tax revenues levied for the organ-				12		\$10
	ization's benefit and either paid to	11.5 11.5		==			
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						i
	the organization without charge						
	Total. Add lines 1 through 3	5255598.	4377101.	5406428.	7016850.	9073591.	31129568.
5	The portion of total contributions	A Second			1 1 1		
	by each person (other than a						. 1
	governmental unit or publicly						(2)
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						1
_	column (f)	MILLER BENEFIT		All Sales			4552558.
	Public support. Subtract line 5 from line 4.		The state of the				26577010.
_							
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	5255598.	4377101.	5406428.	7016850.	9073591.	31129568.
	Gross income from interest,			i			
	dividends, payments received on						
	securities loans, rents, royalties,	33 457	45 641	44 045	44		
	and income from similar sources Net income from unrelated business	33,457.	45,641.	44,217.	41,273.	54,019.	218,607.
	activities, whether or not the						
	business is regularly carried on	i					
	Other income. Do not include gain						
	or loss from the sale of capital	1					
	assets (Explain in Part VI.)			17 004	11 000	2 226	22 222
	Total support. Add lines 7 through 10	THE PERSON NAMED IN		17,984.	11,889.	3,336.	33,209.
	Gross receipts from related activities, a	tc (see instruction	ne)		MASSES HER STATE		31381384.
13	First 5 years. If the Form 990 is for the	organization's fir	t cocond third fo	and a file to		12	
	organization, check this box and stop						
Sec	tion C. Computation of Public	Support Perc	entage				
	Public support percentage for 2021 (lin			olumn (fl)	W THE SAME THE SAME	44	84.69 %
15	Public support percentage from 2020 S	Schedule A. Part II	line 14	31G(1111 (1))		15	00 =0
16a :	33 1/3% support test - 2021. If the or	ganization did not	check the box on	line 13, and line 14	lie 33 1/3% or me	ura abaak thia haw	82.52 %
	stop here. The organization qualifies as	s a publicly suppo	rted organization			ne, check this box	
	33 1/3% support test - 2020. If the or			e 13 or 16a, and lis	ne 15 is 33 1/3%	or more, check this	
8	and stop here. The organization qualific	es as a publicly su	pported organizat	ion		or more, crieck this	▶ □
17a '	10% -facts-and-circumstances test -	2021. If the orga	nization did not ch	eck a box on line 1	13. 16a or 16b ar	nd line 14 is 1094 o	r more
á	and if the organization meets the facts-	and-circumstances	s test, check this b	ox and stop here	. Explain in Part \	thow the organiza	tion
г	neets the facts-and-circumstances test	. The organization	qualifies as a pub	liciv supported ora	omination.		\ <u></u>
b 1	10% -facts-and-circumstances test -	2020. If the organ	nization did not ch	eck a box on line 1	3. 16a. 16b. or 17	7a and line 15 ie 1	
ſ	nore, and if the organization meets the	facts-and-circums	tances test, check	this box and sto	n here. Explain in	Part VI how the	070 OI
(organization meets the facts-and-circum	stances test. The	organization quali	fies as a publiciv s	upported organiza	ition	
18 F	rivate foundation. If the organization	did not check a bo	x on line 13, 16a.	16b, 17a, or 17b.	check this box an	d see instructions	
							orm 990) 2021

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

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not		1	0	19		
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				3 0		10
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513		O.		3 2	20	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf		*		.×:	<u>ુ</u> 30	
5 The value of services or facilities					- 2	
furnished by a governmental unit to			Į.			
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						-
h Amounts included on tines 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		*		8	9	<u> </u>
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) ection B. Total Support						
alendar year (or fiscal year beginning in) 🕨 🔃	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
Amounts from line 6						(I) IOCC
Da Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
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.)						
First 5 years. If the Form 990 is for the c	organization's fire	st, second, third. fo	eurth, or fifth tax v	ear as a section 50	11(c)(3) organization	
					······································	
ection C. Computation of Public !	Support Perc	centage				
Public support percentage for 2021 (line			lumn (ft)		15	
Public support percentage from 2020 Sc	hedule A, Part II	I, line 15			16	
ection D. Computation of Investm	ent Income	Percentage			101	
Investment income percentage for 2021			13 column (fi)	gióna, i rigere	17	
Investment income percentage from 202	0 Schedule A. P				18	
a 33 1/3% support tests - 2021. If the org			line 14, and line	15 is more than 33	1/3% and line 17	
more than 33 1/3%, check this box and	stop here. The o	rganization qualifie	is as a publicly en	io more man oo innorted omenizeti		≥ 110t
			pasiloly su	PPOLICE OI GERIZELI	OII	
b 33 1/3% support tests - 2020. If the arc	ianization did no	t check a hox on li	ne 14 or line 10s	and line 16 ic man	a than 32 1 /20/	
b 33 1/3% support tests - 2020. If the org line 18 is not more than 33 1/3%, check t	janization did no his box and sto	t check a box on li n here. The organi	ne 14 or line 19a, zation qualifies co	and line 16 is more	e than 33 1/3%, and	· -
 b 33 1/3% support tests - 2020. If the organize ine 18 is not more than 33 1/3%, check to Private foundation. If the organization of 	his box and sto	p here. The organi	zation qualifies as	a publicly support	ted organization	> □

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?
 If "Yes," complete Part I of Schedule L (Form 990).
- 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 on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1	HOUSE THE	
2	10030	DED.
3a		Desi
3b	THE CAMPBELL AND ADDRESS OF THE PARTY.	SEC. 74.13
3c	ARES	0.22
4a		-)\@
		T W
4b		
		1
4c		. 5
5a		
5b	Eliza E	
5c	Special V	273
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6		0.00
7		[23]
8		
9a		610
9b	200	come
9c		
	d II	27
10a		
10b		11.1

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Part V Type III Non-Functionally Integrated 509(a)(3) Support	H RUNNING	STRONG INC	54-1594578 Page
† Check here if the organization satisfied the Integral Part Test as a quality of the Integral P	pitting trust on t	IZALIONS	—
All other Type III non-functionally integrated supporting organizations	must complete:	90v. 20, 1970 (<i>explain in</i> Sections A through F.	Part VI). See instructions.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	11		(1)
2 Recoveries of prior-year distributions	2		
3 Other gross income (see Instructions)	3		
4 Add lines 1 through 3.	4		201
5 Depreciation and depletion	5		2511
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount	54	(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors	- CALE 10		Sign Constitution of the
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1 1	A CONTRACTOR	
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4	VANCE SEPTEMBER OF SERVER	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	359		
emergency temporary reduction (see instructions).	6		
	onally integrated	Type III supporting organ	rization (see
	onally integrated	Type III supporting organ	vization (see

Schedule A (Form 990) 2021

AMERICAN INDIAN YOUTH RUNNING STRONG INC 54-1594578 Page 7 Schedule A (Form 990) 2021 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 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 purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 (i) (H) (iii) Section E - Distribution Allocations (see instructions) **Underdistributions Excess Distributions** Distributable Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 a From 2016 **b** From 2017 c From 2018 d From 2019 e From 2020 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2021 distributable amount i Carryover from 2016 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2021 from Section D. line 7: a Applied to underdistributions of prior years b Applied to 2021 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2017 b Excess from 2018 c Excess from 2019

Schedule A (Form 990) 2021

e Excess from 2020

** PUBLIC DISCLOSURE COPY **

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

AMERICAN INDIAN YOUTH RUNNING STRONG INC

Employer identification number

Schedule B (Form 990) (2021)

	AMERICAN INDIAN YOUTH RUNNING ST	RONG INC	54-1594578
Organization type (chec	:k one):		
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as	s a private foundation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation	74	j.
	4947(a)(1) nonexempt charitable trust treated as a pr	rivate foundation	
	501(c)(3) taxable private foundation		
	n is covered by the General Rule or a Special Rule.		
iote: Only a section 501	(c)(7), (8), or (10) organization can check boxes for both the Ger	neral Rule and a Special Rul	le. See instructions,
General Rule	· · · · · · · · · · · · · · · · · · ·	10.	
Special Rules	ny one contributor. Complete Parts I and II. See instructions for		
sections 509(a)(1 contributor, duri	ion described in section 501(c)(3) filing Form 990 or 990-EZ that i) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Par ng the year, total contributions of the greater of (1) \$5,000; or (EZ, line 1. Complete Parts I and II.	t II, line 13, 16a, or 16b, and	that received from any one
contributor, durir literary, or educa	ion described in section 501(c)(7), (8), or (10) filing Form 990 or sing the year, total contributions of more than \$1,000 exclusively ational purposes, or for the prevention of cruelty to children or an (b) instead of the contributor name and address), II, and III.	for religious, charitable, sci	entific,
year, contribution is checked, enter purpose. Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or some exclusively for religious, charitable, etc., purposes, but no sure here the total contributions that were received during the year omplete any of the parts unless the General Rule applies to thole, etc., contributions totaling \$5,000 or more during the year	ch contributions totaled mo for an exclusively religious is organization because it re	ore than \$1,000. If this box , charitable, etc.,
nswer "No" on Part IV, lin	that isn't covered by the General Rule and/or the Special Rules ne 2, of its Form 990; or check the box on line H of its Form 990 ng requirements of Schedule B (Form 990).	doesn't file Schedule B (Fo EZ or on its Form 990 PF,	rm 990), but it must Part I, line 2, to certify

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

Name of organization

Employer identification number

AMERICAN INDIAN YOUTH RUNNING STRONG INC

<u>54-1594578</u>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 7	#	\$\$.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$761,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$503,509.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>452,504.</u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
- <u>-</u> -		\$	Person Payroll Noncash (Complete Part II for

AMERICAN INDIAN YOUTH RUNNING STRONG INC

54-1594578

(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	FOOD, NEW CLOTHING, HYGIENE ITEMS, AND SHOES	- 27	
		\$646,408.	06/30/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	FOOD, NEW CLOTHING, HYGIENE ITEMS, AND SHOES		**
		<u>503,509.</u>	06/30/22
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	NEW CLOTHING AND SCHOOL SUPPLIES		
		\$\$	06/30/22
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
(a)		\$	
No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_			
		\$	
(a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	

Page 4 Name of organization **Employer identification number** AMERICAN INDIAN YOUTH RUNNING STRONG INC 54-1594578 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this Info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number AMERICAN INDIAN YOUTH RUNNING STRONG INC 54-1594578 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located \blacktriangleright Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV. line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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Mark Inc.	edule D (Form 990) 2021 AMERICA rt III Organizations Maintaining (AN INDIAN Y Collections of A	OUTH RUNN: rt, Historical Tr	ING STRO	NG INC	: 54- imilar Ass	1594578	Page 2
3	Using the organization's acquisition, access	sion, and other record	is, check any of the	e following that	t make signi	ficant use of	its	ueu)
	collection items (check all that apply):			10 100				
а	Public exhibition		d Loan or ex	change progra	am			
b	Scholarly research			_				
C	Preservation for future generations							
4	Provide a description of the organization's of	ollections and explai	n how they further	the organization	on's exempt	purpose in P	art XIII.	
5	During the year, did the organization solicit	or receive donations	of art, historical tre	asures, or othe	er similar ass	sets		
_	to be sold to raise funds rather than to be m	aintained as part of t	he organization's o	offection?			Yes	☐ No
Pa	rt IV Escrow and Custodial Arran	igements. Compl	ete if the organizat	ion answered '	'Yes" on For	m 990, Part	IV, line 9, or	
	reported an amount on Form 990, Pa	ırt X, line 21.						
1a	Is the organization an agent, trustee, custod							_
	on Form 990, Part X?						Yes	☐ No
þ	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					
							Amount	
C	Beginning balance				A	1c		
	Additions during the year					*Id		- 25
0	Distributions during the year					_1e		- 86
f	Ending balance					1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or o	custodial accou	unt liability?		Yes	☐ No
Pai	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	planation has beer	provided on F	Part XIII			
1 4	t V Endowment Funds. Complete	If the organization an					 	
4.7	Planta in a state of the	(a) Current year	(b) Prior year	(c) Two year	s back (d)	Three years ba	ck (e) Four y	ears back
1a	Beginning of year balance			 				
D	Contributions	<u> </u>		 				
c	Net investment earnings, gains, and losses	A1	- 2	- -		71		- 9
a	Grants or scholarships							
е	Other expenditures for facilities				1			
	and programs			 				
f	Administrative expenses			 -				
g	End of year balance			<u> </u>				
2	Provide the estimated percentage of the curr		e (line 1g, column (a	a)) held as:				
	Board designated or quasi-endowment Permanent endowment P		_%					
	_	%						
·	The percentages on lines 2a, 2b, and 2c short	%						
30	Are there endowment funds not in the posse		*****			ş		
Ou	by:	SSION OF THE ORGANIZA	uon mat are neid a	no administere	o for the or	ganization	<u></u>	(N-
	•							es No
			******************************				3a(i)	+-
h	(ii) Related organizations	tions listed as require	nd on Schodule B2				3a(ii)	+
4	Describe in Part XIII the intended uses of the	organization's andou	ement funde				3b	
Par	t VI Land, Buildings, and Equipm	ent.	ment fallas.					
	Complete if the organization answered		Part IV. line 11a. S	See Form 990.	Part X. line	10.		
	Description of property	(a) Cost or of	·	t or other	(c) Accun		(d) Book v	ميام
		basis (Investm		(other)	depreci		(a) Book (value
1a	Land		,	=,	200,000	W4 = 30.02		
	Buildings		15	7,920.	5.8	,915.	90	,005.
C	Leasehold improvements			.,		,,,,,,		, , , , , , ,
	Equipment		22	0,473.	135	,585.	8.4	,888.
	Other			3,029.		,,,,,,,	2,803	029
	Add lines 1a through 1e. (Column (d) must ex							922

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

	adule D (Form 990) 2021 AMERICAN INDIAN YOUTH RUNNING STRONG I	NC 54	-1594578 Page
Pal	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return	٦.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements		8,796,699
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		0,730,033
а	1 1 magazi	569.	
ь	Donated services and use of facilities 2b	100	
C	Recoveries of prior year grants 2c	a a	
d			P.
e	Add lines 2a through 2d	2e	-404,569
3	Subtract line 2e from line 1	3	9,201,268
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	75.0	
a	Investment expenses not included on Form 990, Part VIII, line 7b	863.	
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	5,863
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	9,207,131
Par	T XIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Retu	m.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		94
1	Total expenses and losses per audited financial statements	1	5,942,394
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
C	Other losses 2c		
	Other (Describe in Part XIII.)		
	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	5,942,394.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	15.5	2.
		863.	
	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	40	5,863.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)	5	5,948,257.
	t XIII Supplemental Information.		
lines 2	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. TX, LINE 2:	V, line 4; Part	X, line 2; Part XI,
	ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAINTY I	N TAX F	POSITIONS
TAK	EN FOR THE YEAR ENDED JUNE 30, 2022, AND DETERMINED TH	AT THER	E WERE NO
MAT	TERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL S	TATEMEN	TS OR THAT
MAV	HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.		
MAI	HAVE ANT EFFECT ON ITS TAX-EXEMPT STATUS.		<u> </u>
			<u> </u>
			 -
			
	· · · · · · · · · · · · · · · · · · ·		<u> </u>

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for the latest information. ➤ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Schedule I (Form 990) 2021					hons for Form 890.	On nem on ooo	ORS Wild Stings neur and sample and see the manufacture and see the manufacture and see the second s
₩					e i table	Bee the leading	٦ [
▶ 26.	***************************************			line 1 table	organizations listed in the	d government o	 criter total number of other organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 4 table
NEEDS	SUPPLIES	787	25,784. PMV	-	04 02 8 8 1 0 0 1 (C) (O)	0000000	
CRITICAL AMERICAN INDIAN	SCHOOT C			1	7	84 002270	DENVER CD 80219
	, ka						4407 MORRISON ROAD
	NEW CLOTHING,						DENVER INDIAN CENTER
NEEDS	SUPPLIES N	PMV	55,150.	٥	/3-145/004 DUI(C)(3)	13-145/00	- 1
CRITICAL AMERICAN INDIAN	SCHOOL C			1		1 4000	TAHLEOUAH OF 74464
	HYGIENE,						800 S. MUSROGEE AVENUE
	NEW CLOTHING,						CHEROKEE NATION FOUNDATION
NEEDS			0.	10,000.	5/-0901191 b01(C)(3)	677660-/C	100 mg 100 mg 100
CRITICAL AMERICAN INDIAN							
							g
NK KUV	DISTORE						
CRITICAL AMBRICAN INDIAN	THING,		68 494	5 000	4 501(C)(3)	32-0263934	- SALLISAW, OK 74955
							ASSOCIATION - 465406 B. 1010 ROAD
							BRUSHY - CHEROKEE ACTION
CULTURE PRESERVATION			٥.	1,270,00%			
			>	370	8 501 (C) (3)	54-1594578	LAKE ANDES, SD 57356
				<u>30</u>			300 MAIN STREET
							BRAVE HEART SOCIETY
NEEDS	DIGLEME	1000	ĺ				59
CRITICAL AMBRICAN INDIAN		av.	50 821	0	85-1013604 501(C)(3)	85-101360	GARRYOWEN, MT 59031
THICK WESTERN THE THE	NEW CLOWNING						751 RENO CREEK ROAD
							BIILUUKE STRONG
		Outer)					
or assistance	noricaso assistance	FMV, appraisal,	assistance	9.4			
(h) Purpose of grant	(g) Description of	valuation (book,	(e) Amount of	(d) Amount of	(f) IRC section	(D) EIN	or government
			<u> </u>	onal space is neede	an de duplicated ir addit	2,000.	1 (a) Name and address of procedures that we would be applicated it address at procedure to the second seco
IV, line 21, for any	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	anization answered "Y	omplete if the orga	Governments. C	inizations and Domestic	Domestic Orga	recipient that received more than \$5,000 Part II can be discribed a first that received more than \$5,000 Part II can be discribed as a first transfer of the first transfer of t
[States.	funds in the United	unitoring the use of grant	cedures for mo	⊣8
X	omitted and odiocuto		ć			tance?	
5	orants or assistance and the selection	for the grants or assi	grantees' eligibility	or assistance, the o	the amount of the grants	o substantiate	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the
0/C#CT_#C						nd Assistance	Part I General Information on Grants and Assistance
Employer Jaenancation numbe			ถ	STRONG IN	AMERICAN INDIAN YOUTH RUNNING STRONG INC	INDIAN Y	l.
							Name of the organization

_	7
Part II	Schedule
II Continuation of	l (Form 990)
wation of Grants and Other Assistance	AMERICAN INDIAN YOUTH RUNNING STRONG INC
Assistance to	INDIAN
o Domestic	HTUOY
Organizations	RUNNING
and Domestic	STRONG :
GOVERNO	INC

Schedule I (Form 990) AMERICAN Part III Continuation of Grants and Other	INDIAN YOU	AMERICAN INDIAN YOUTH RUNNING	STRONG INC				54-1594578	Page 1
- 1.	Nasiaeiro W Doi	nesuc organizations	and Pomestic Go		(Schedule I (Form 990), Part II.)	A II.)		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	#
						NEW CLOTHING,		ı
r	84-1568837 501(C)(3)	501(C)(3)	0.	21,799.	PMV	SCHOOL SUPPLIES	CRITICAL AMERICAN INDIAN NEEDS	MAIGN
)F						NEW CLOTHING, HYGIENE,		
ACTION - 1671 SUMMIT AVENUE - SAINT PAUL, MN 55105	41-0694741	501(C)(3)		33 830	, The state of the	SCHOOL	CRITICAL AMBRICAN INDIAN	DIAN
DIVISION OF INDIAN WORK								
MINNEAPOLIS, MN 55407	41-0693933 501(C)(3)	501(C)(3)	25,000.	0.			CRITICAL AMERICAN INDIAN	TDIAN
EUCHEE LANGUAGE PROJECT 1006 SOUTH MAIN STREET						NEW CLOTHING,	CRITICAL AMERICAN IN	NA TO
SAPULPA, OK 74066	45-3975380	501(C)(3)	29,850.	16,129.	PMV	SS.	NEEDS AMBRICAN INDIAN	DIAN
INDIAN YOUTH OF AMERICA	¥.		E					
SIOUX CITY, IA 51106	52-1150452 501(C)(3)	501(C)(3)	5,000.	13,281.	PMV	SCHOOL	CRITICAL AMERICAN INDIAN	DIAN
INDIGENOUS HEALTH AND WELLNESS SOLUTIONS - 225 E. GREENWOOD AVENUE - MIDVALE, UT 84047	85-1539550		10,000.	0.		н.	CRITICAL AMERICAN INDIAN	DIAN
IOWA TRIBE OF KS & NE BOYS AND GIRLS CLUB - 2169 IOWA DRIVE - WHITE CLOUD, KS 66046	63-0489646	N/A	2) •	22,759.	NA PART	SCHOOL NEW CLOTHING	CRITICAL AMERICAN INDIAN	DIAN
JOE FOSS AT AXTEL PARK 201 N. WEST AVENUE SIOX FALLS, SD 57104	46-6002586	501(c)(3)	0.	23,583.	FMV	SCHOOL SUPPLIES, NEW C	CRITICAL AMERICAN INDIAN	DIAN
MUSCOGEE (CREEK) NATION P.O. BOX 580 OKMULGEE, OR 74447	73-0932018	73-0932018 TRIBAL GOVERNMEM	10,000.	0.			CRITICAL AMERICAN INDIAN	DIAN

132241 11-18-21

n 990)
AMERICAN
INDIAN
HTUOY
RUNNING
STRONG INC
INC

(a) Nome and address of	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I	Schedule ((Form 990) AMERICAN INDIAN YOUTH RUNNING STRONG INC
	Assistance to Dor	INDIAN YOU
	nestic Organizations	OTH RUNNING
	and Domestic G	STRONG I
	overnments (Sc	NC
	hedule I (Form 990), Part II.)	
		54-1594578
	300	Page 1

NEEDS	2		0.	10,000.	501(C)(3)		RENO, NV 89519
TRITUTO A TROTTON							SIERRA ENDURANCE SPORTS 13987 S. VIRGINIA STREET, SUITE 704
CRITICAL AMERICAN INDIAN NEEDS	HYGIENE N	VMS	15,948.	15,000.	501(C)(3)	26-1088259	SACRED PIPE RESOURCE CENTER 424 ASHWOOD AVENUE BISMARCK, ND 58504
CRITICAL AMERICAN INDIAN	NEW SCHOOL C	VMS	54,985.	0.	501(c)(3)		RURAL COMMUNITIES INITIATIVE FOUNDATION - 301 S. LOCUST STREET - SALLISAW, OK 74955
CRITICAL AMBRICAN INDIAN NEEDS	NEW CLOTHING, HYGIENE, SCHOOL C	PMV	28,347.	0.	501(c)(3)	87-6000511 501(C)(3)	PROVO CITY SCHOOL DISTRICT 280 WEST 940 NORTH PROVO, UT 84604
CRITICAL AMBRICAN INDIAN	NEW CLOTHING, HYGIENE, SCHOOL SUPPLIES, FOOD N	PMV	335,696.	826,138.	N/A	46-0217222	PINE RIDGE RESERVATION DISTRICTS PINE RIDGE INDIAN RESERVATION PINE RIDGE, SD 57770
CRITICAL AMERICAN INDIAN	NEW CLOTHING, C	PMV	9,470.	210,594.	501(C)(3)	46-0438929	OYATE TECA PROJECT P.O. BOX 316 KYLE, SD 57752
CRITICAL AMERICAN INDIAN NEEDS			0.	10,000.	N/A	46-3560509	NORTH KOBALA COMMUNICATION P.O. BOX 519 HAWI, HI 96719
CRITICAL AMERICAN INDIAN NEEDS	SCHOOL SUPPLIES, NEW C	AWA	39,967. PMV	10,000.	501(c)(3)	87-6000505 501(C)(3)	NEBO SCHOOL DISTRICT 1175 E. FLONETTE DRIVE SPANISH FORK, UT 84660
CRITICAL AMERICAN INDIAN			0.	10,000.		85-1414391	NAVAJO STRONG 333 BAST MAIN STREET LEHI, UT 84043
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of noncash assistance	(d) Amount of cash grant	(c) IRC section if applicable	(b) EIN	(a) Name and address of organization or government

Schedule I (Form 990)

	vrm 990)
	AMERICAN
	INDIAN
	HTUOY
	RUNNING
	STRONG
	INC
ı	

130041	WAKPALA SCHOOL 12250 SD HIGHWAY 1806 WAKPALA, SD 57658 46-6001279 501(C)(3)	TODAY WE FOLLOW-TOMORROW WE LEAD SUMMYSIDE 98 CHINLE, AZ 86503 46-3206765 N/A	THROUGH PISCATAWAY EYES 7750 POMFRET ROAD LA PLATA, MD 20646 86-3915040 501(C)(3)	THE KEYA POUNDATION P.O. BOX 1824 EAGLE BUTTE, SD 57625 46-0879346 501(C)(3)	THE BEBELA PROJECT, INC. 118 S. WILLOW STREET EAGLE BUTTE, SD 57625 81-0780366 501(C)(3)	TAKINI SCHOOL HC 77 HOWES, SD 57748 46-0406180 501(C)(3)	SUMMIT SCHOOL DISTRICT 54-6 P.O. BOX 791 SUMMIT, SD 57266 46-6002856 501(C)(3)	SPIRIT LAKES TRIBAL HEALTH DEPARTMENT - P.O. BOX 480 - FT. TOTTEN, ND 58335 45-0134494 N/A	SLIM BUTTES AGRICULTURAL DEVELOPMENT PROGRAM - P.O. BOX 3014 - PINE RIDGE, SD 57770 20-8332945 N/A	(a) Name and address of (b) EIN (c) IRC section organization or government if applicable	Fart II Commutation of Grants and Other Assistance to Domestic Organizations and Domestic Governments
	0.	5,000.	10,000.	0.	10,000.	0.	0.	0.	22,597.	(d) Amount of cash grant	and Domestic Go
	95,378.	45,164.	0.	28,067.	0.	32,473.	14,956.	37,819.	0.	(e) Amount of noncash assistance	
	PMV	PMV		PMV		PMV	PMV	PMV		(f) Method of valuation (book, FMV, appraisal, other)	(Schedule I (Form 990), Part II.)
	POOD	SCHOOL SUPPLIES, NEW CLOTHING		SCHOOL SUPPLIES, NEW CLOTHING		FOOD	SCHOOL SUPPLIES, NEW CLOTHING	NEW CLOTHING, HYGIENE, SCHOOL SUPPLIES		(g) Description of non-cash assistance	art II.)
Schedule I (Form 990)	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	CRITICAL AMERICAN INDIAN	(ħ) Purpose of grant e or assistance	

34

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)	Assistance to Do	drants and Other Assistance to Domestic Organizations and Domestic Government	and Domestic Go	vernments (Sche	dule I (Form 990), Par		Tage -
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
P.O. BOX 2460 BROWNING, MT 59417	81-3755296 5 01(C)(3)	501(C)(3)	10,000	0			CRITICAL AMBRICAN INDIAN
	. v.						NAME OF THE PARTY
	V:		V				
	**		2				
121 88	318 JA	5 5 5 5	el .				
	2		8.				

Schedule I (Form 990)

Schedule ((Form 990) 2021 AMERICAN INDIAN YOUTH RUNNING STRONG INC	YOUTH RU	NNING STRO	ONG INC		54-1594578 Page 2
Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	Complete if the	organization answe	red "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
DREAMSTARTER SCHOLARSHIP	1	מ מ מ	5		
		ĝi			
DREAMSTARTER CREATIVE	10	24,280.	0.		
TEACHER AWARD	o n	1 7 8	.		
 OX					
BEREAVEMENT	-	5,000.	0.		
-					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other addition	ired in Part I, line	2; Part III, column (b); and any other ad	ditional information.	

PART I, LINE 2:

GRANT REQUESTS ARE SUBMITTED BY ORGANIZATIONS FOLLOWING RUNNING STRONG'S

PUBLISHED GRANT GUIDELINES. RUNNING STRONG CONDUCTS A PRE-GRANT REVIEW TO

DETERMINE THE CAPABILITY OF THE APPLICANT TO CARRY OUT THE PROJECT WHICH IS

TO BE FUNDED BY THE PROPOSED GRANT. IF RUNNING STRONG DECIDES TO AWARD THE

GRANT, THE CHARITY ENTERS INTO A WRITTEN GRANT AGREEMENT WITH THE GRANTEE

WHICH INCLUDES FINANCIAL REPORTS BY THE GRANTEE AND NARRATIVE REPORTS

SETTING FORTH THE OBJECTIVES ACCOMPLISHED BY THE PROJECT THAT IS FUNDED BY

THE GRANT.

Schedule I (Form 990) Part IV Supplemental Infor	AMERICAN IND:	IAN YOUTH RUNNI	NG STRONG INC 5	4-1594578 Page 2
			175	
THE STAFF OF RUNNING	G STRONG REVI	EWS THE REPORTS	FROM THE GRANT	EE TO ASSESS
WHETHER THE GRANTEE	ADEQUATELY H	AS ACCOUNTED FO	OR THE USE OF GR	ANT FUNDS AND
THE RESULTS ACHIEVED	D THROUGH THE	PROJECT WHICH	IS FUNDED BY TH	E GRANT.
RUNNING STRONG STAFF	F ALSO FROM T	IME TO TIME CON	NDUCT ON-SITE "F	IELD VISITS"
TO VISIT THE PROJECT	r FUNDED BY T	HE GRANT, TROUE	BLESHOOT CHALLEN	GES AND LEARN
FROM SUCCESSES. THE	PROJECT FUND	ED BY THE GRANT	MUST BE CONSIS	TENT WITH THE
CHARITY'S CHARITABLE		76	40	- 24
*	2	53		*
			<u> </u>	
		072*	<u> </u>	
<u> </u>			75	
*	- 2	**	*	
			_86	
		53 - 544		
		93 - 100 - 1		
	a	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		
2				
		20	F	
	5 - J	- 1		
853 - 39 - Turk? - Ar				
		50 DE		

132291 04-01-21 Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN INDIAN YOUTH RUNNING STRONG INC **Questions Regarding Compensation**

Employer identification number 54-1594578

			Yes	No
1	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	100		MAR
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use		1176	9373
	Travel for companions Payments for business use of personal residence		100.00	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			ENG!
	Discretionary spending account Personal services (such as maid, chauffeur, chef			
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	16		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		1000	10:375
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			200
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study		100	
	Form 990 of other organizations Approval by the board or compensation committee		122	
	Approval by the board or compensation committee	30	925	
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
11.7	organization or a related organization:			200
а		Maria San	ESSIV.	v
ь	Participate in or receive payment from a supplemental nonqualified retirement plan?	4a	\vdash	X
_	Participate in or receive payment from an equity-based compensation arrangement?	4b	\vdash	X
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		A
	is to any or into sact, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	100		
	contingent on the revenues of:			
а	The organization?	5a	sureason.	X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.	20000	Dr. 34	WE I
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	200	1	
	contingent on the net earnings of:		188	
а	The organization?	6a	Colonia	X
ь	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.		63/00	-
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	13721		1 4 5
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	none and a	EEC I	1 12
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	417	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	0.000	(0,08)	Keus
	Regulations section 53.4958-6(c)?	9	ecrots il	
LHA	For Demonstrate Particulation 4 - 4 54 - 44 - 44 - 44 - 45 - 46 - 46	hedule J (Form	990) :	2021

Schedule J (Form 990) 2021

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

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

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

	(5)			(ii)		9	(5)		(ii)				3		139,337. 0. 0. 11,208. 4,994. 155	(6) (BIRT TO	B PRESIDENT/GENERAL COUNSEL (II) 243,096. 0. 0. 19,266. 26,08	PAUL B. KRIZEK, ESQ. (I) 0. 0. 0. 0. 0. 0. PRESIDENT/GENERAL COUNSEL (II) 243,096. 0. 0. 19,266. 26,083.	IDENT/CEO (II) 292,015. 0. 0. 23,200. 22,498. PAUL B. KRIZEK, ESQ. (I) 0.	BRYAN L. KRIZEK (I) 0. 0. 0. 0. 0. 0. 0. 0. 10. 10. 10. 10.	(A) Name and Title (I) Base (II) Bonus & (III) Other reportable compensation incentive reportable compensation compensation compensation paulic KRIZEK (II) 292,015. 0. 0. 23,200. 22,498. PAUL B. KRIZEK, ESQ. (II) 243,096. 0. 0. 0. 19,266. 26,083. 2	(A) Name and Title (i) Base (ii) Bonus & (iii) Other compensation BRYAN L. KRIZEK (i) 292,015. PAUL B. KRIZEK, ESQ. (ii) 243,096. (iii) 243,096. (iv) Compensation compensation compensation (iv) 0. 0. 0. 0. 23,200. 0. 0. 0. 0. 0. 19,266. 26,083.
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															-	155 53	1.5.7	288	288,	288,	337,	337,	337, 288,
	:											;										reported as defe on prior Form 9	(F) Compensar in column (B reported as defe on prior Form s

Page 3

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PURSUANT TO THE COMPENSATION GUIDELINES, THE BOARD OF DIRECTORS OF THE CENTRAL ORGANIZATION REVIEWS APPROPRIATE COMPARABILITY SURVEYS WHICH

PRESENT THE COMPENSATION DATA AND 990'S OF OTHER TAX-EXEMPT

ORGANIZATIONS WITH SIMILAR MISSIONS AND REVENUES, TO ASSESS WHAT IS

ORDINARY AND REASONABLE IN TERMS OF THE RELEVANT MARKET FOR

COMPENSATION. THE DATA INCLUDED IN THE COMPARABILITY SURVEYS COMES FROM

ORGANIZATIONS AND CONSULTANT RESEARCH STUDIES. NUMEROUS SOURCES, SUCH AS ASSOCIATION SURVEYS 990S OF COMPARABLE THE DATA IS FOCUSED ON

COMPARABLE TAX-EXEMPT ORGANIZATIONS LOCATED WITHIN THE GREATER

Schedule J (Form 990) 2021

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Schedule J (Form 990) 2021

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Nan	ne of the organization				Employer id	entification	numb	er
	AMERICAN INI	OIAN YO	UTH RUNNII	NG STRONG INC		-159457		
Pa	rt I Types of Property							_
	to de la companya de	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr	(d) determining ibution amo		
1	Art · Works of art							
2	Art - Historical treasures							_
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		743,563.	FMV			Т
6	Cars and other vehicles							_
7	Boats and planes	24		W	90			_
- 8	Intellectual property	32		20				
9	Securities - Publicly traded	Х	1	15,325.	FMV			_
10	Securities - Closely held stock				Î			_
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous				<u> </u>			_
13	Qualified conservation contribution - Historic structures							
-14	Qualified conservation contribution - Other	0.375		91	- 5			_
15	Real estate · Residential							_
16	Real estate - Commercial		·	-				_
17	Real estate - Other				<u> </u>			_
18	Collectibles							_
19	Food inventory	X	16	901,128.	FMV			_
20	Drugs and medical supplies							_
21	Taxidermy							_
22	Historical artifacts			·				_
23	Scientific specimens							_
24	Archeological artifacts							_
25	Other (SCHOOL SUPP.)	X	1	266,354.	FMV			_
26	Other (TOYS)	X	1	47,431.	FMV			_
27	Other ()							_
28	Other (
29	Number of Forms 8283 received by the organi	zation during	the tax year for co	ntributions	<u> </u>			_
	for which the organization completed Form 82				·		s N	_
30a	During the year, did the organization receive by	v contribution	any property repo	orted in Part I. lines 1 throug	h 28 that it	12.5	3 14	N.
	must hold for at least three years from the date					1		
	exempt purposes for the entire holding period	_				30a	Х	-
ь	If "Yes," describe the arrangement in Part II.		******************************	***************************************		300		
31	Does the organization have a gift acceptance p	oolicy that red	quires the review o	f any nonstandard contribut	ions?	31 X		
32a	Does the organization hire or use third parties				101131	 		_
-23	contributions?					32a	x	
b	If "Yes," describe in Part II.	*		***************************************		V2.0		363
33	If the organization didn't report an amount in c	olumn (c) for	a type of property	for which column (a) is chec	ked		8	
	describe in Part II.		>F Proporty			mark and		

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Schedule M (Form 990) 2021

is reporting in Part (.column B), the number of contributions, the number of Herns received, or a contribution of both, Adve compiles this part for any additional information. SCHEDULE M, LINE 32B: ALL OFFERED GIPTS ARE REVIEWED UNDER OUR GIFT ACCEPTANCE POLICY PRIOR TO ACCEPTANCE. SCHEDULE M, LINE 33: THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.	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 its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of its reporting in Part I. column (c) the number of contributions the number of contri	<u>ge 2</u>
ALL OFFERED GIFTS ARE REVIEWED UNDER OUR GIFT ACCEPTANCE POLICY PRIOR TO ACCEPTANCE. SCHEDULE M, LINE 33: THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.	is reporting in Farth, column tot, the number of contributions, the number of fems received, or a combination of both, also complete	
TO ACCEPTANCE. SCHEDULE M, LINE 33: THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.	SCHEDULE M, LINE 32B:	
SCHEDULE M, LINE 33: THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.	ALL OFFERED GIFTS ARE REVIEWED UNDER OUR GIFT ACCEPTANCE POLICY PRIOR	
THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.	TO ACCEPTANCE.	86
THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.		5)
CONTRIBUTIONS THAT WERE RECRIVED FOR THE YEAR ENDED JUNE 30, 2022.	SCHEDULE M, LINE 33:	
	THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF	
12/142 11-17-21 Schedule M (Form 990) 2021	CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2022.	
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	132142 11-17-21 Schedule M (Form 990) 20	 021

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

AMERICAN INDIAN YOUTH RUNNING STRONG INC

Employer identification number

54-1594578 FORM 990, ITEM C, DOING BUSINESS AS: RUNNING STRONG FOR AMERICAN INDIAN YOUTH FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: RUNNING STRONG CONTINUED INCREASING OUR SUPPORT FOR CRITICAL NEEDS WITH FOOD AND WATER CONNECTIONS, AS WELL AS WITH THOUSANDS OF BRAND NEW INKIND ITEMS TO COMMUNITIES ACROSS THE COUNTRY. FOOD REMAINS A RUNNING STRONG PRIORITY AS WE WORK HARD TO FEED CHILDREN WHO MAY OTHERWISE GO HUNGRY. USING OUR PINE RIDGE FIELD OFFICE WAREHOUSE, RUNNING STRONG DONATED 10,676 DRY AND FROZEN FOOD BOXES TO FEED FAMILIES ON THE PINE RIDGE AND CHEYENNE RIVER SIOUX INDIAN RESERVATIONS, ALONG WITH 16,371.35 LBS OF TURKEYS FOR THANKSGIVING AND 15,075.10 LBS OF FROZEN HAMS FOR CHRISTMAS. EACH FOOD BOX WEIGHED APPROXIMATELY 20 LBS. AND HAD ENOUGH NUTRITIOUS FOOD TO FEED A FAMILY OF FOUR OR A WEEK. AFTER TEACHERS TOLD US STUDENTS RETURNED TO SCHOOL AFTER WEEKENDS AND SCHOOL BREAKS LISTLESS AND HUNGRY, WE STARTED OUR WEEKEND/SCHOOL BREAK BACKPACK FOOD PROGRAM. ON CHEYENNE RIVER, WE DONATE BAGS FILLED WITH FOOD TO TAKINI SCHOOL CHILDREN OVER WEEKENDS AND SCHOOL BREAKS WHEN THEY DO NOT HAVE ACCESS TO FREE SCHOOL LUNCHES AND BREAKFASTS (175 STUDENTS PER WEEK, 4,200 SACKS OF FOOD DISTRIBUTED). WE ALSO SUPPORT A BACKPACK FOOD PROGRAM ON THE STANDING ROCK RESERVATION IN SOUTH DAKOTA, SERVING HEALTHY "SMART SACKS" FOR THE ENTIRE WAKPALA SCHOOL (180

CHILDREN PER WEEK, 5,760 SACKS OF FOOD). KIDS WERE NOT ONLY KEPT FROM

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

132211 11-11-21

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	Page
Name of the organization AMERICAN INDIAN YOUTH RUNNING STRONG INC	Employer identification number 54-1594578
BEING HUNGRY, THEY BECAME INVOLVED IN BUILDING THE FOOD BE	AGS AS A WAY
TO EARN VOLUNTEER HOURS.	
	M
AFTER THE SCHOOL YEAR ENDS, RUNNING STRONG SERVED A HEALTH	Y SACK LUNCH
TO CHEYENNE RIVER KIDS IN THREE COMMUNITIES SO THAT THESE	KIDS HAVE
SOMETHING TO EAT DURING THEIR SUMMER VACATION WHEN THEY DO	NOT HAVE
ACCESS TO A FREE SCHOOL LUNCH AND BREAKFAST. THIS SUMMER F	OOD PROGRAM
SERVED 15,006 MEALS TO CHILDREN AT 3 SITES OVER 11 WEEKS,	
BREAKFAST AND LUNCH SAFELY TO AN AVERAGE OF 146 KIDS PER D	AY.
RUNNING STRONG ALSO SUPPORTS ORGANIC GARDENING EFFORTS AS	COMMUNITIES
WORKED TO GROW THEIR OWN FOOD. IN FY22, WE CONTINUED TO IN	VEST IN THE
OYATE TECA (YOUTH NATION'S) MEDICINE ROOT GARDENING PROGRA	M, WHICH IS
ALSO THE SITE OF ONE OF OUR FIELD OFFICES ON THE PINE RIDG	E INDIAN
RESERVATION IN SOUTH DAKOTA.	
RUNNING STRONG CONTINUES TO PROVIDE FOUNDATIONAL SUPPORT F	OR OYATE
TECA'S NINE-MONTH GARDEN EDUCATION CLASSES WHICH HOW TO GR	OW, HARVEST,
PREPARE AND EAT FRESH PRODUCE ON PINE RIDGE. A BIG PART O	F THE CLASS
IS HANDS-ON INSTRUCTION AND THE TOOLS TO PLAN & PLANT YOUR	OWN GARDEN,
AND PROVIDING THE TOOLS, SEEDLINGS AND FENCING TO PLANT 30	STUDENT
GARDENS ALONG WITH THE EXTENSIVE DEMONSTRATION GARDEN AND	GREENHOUSES
LOCATED BY THE OYATE TECA COMMUNITY CENTER. IN 2022, OYATE	TECA'S
GARDENERS GREW 18 TONS OF FRESH PRODUCE (NOT INCLUDING THE	WINTER
SQUASH AND FALL PUMPKINS) WHICH WAS SOLD AT LOCAL FARMERS I	MARKETS, AS
WELL AS GIFTED AND COMPOSTED.	

Name of the organization AMERICAN INDIAN YOUTH RUNNING STRONG INC	Employer identification number 54-1594578
SALES OF THEIR OWN GROWN PRODUCE PROVIDED NEEDED INCOME AN	D INCREASED
THE QUALITY OF FOOD OFFERINGS IN THE LOCAL COMMUNITY. THE	MEDICINE
ROOT GARDEN ALSO LAUNCHED ITS MOBILE MARKET PROGRAM. GIVEN	THE SIZE OF
THE PINE RIDGE INDIAN RESERVATION, GETTING TO WHERE HIGH-Q	UALITY FRESH
PRODUCE IS AVAILABLE CAN BE VERY CHALLENGING, WITH THE CLO	SEST GROCERY
STORY NEARLY 80 MILES AWAY, OFF THE RESERVATION. THE MOBIL	E MARKET,
EQUIPPED WITH A GENERATOR, REFRIGERATION, SHELVING, AND AIR	
CONDITIONING, TRAVELS OUT TO HARDER TO REACH LOCATIONS ON	THE
RESERVATIONS THREE DAYS A WEEK, STOPPING AT THREE LOCATIONS	S ON THE
RESERVATION AND TRAVELING NEARLY 100 MILES TO REACH RESIDE	NTS. THE
MOBILE MARKET OFFERS THE GARDEN PRODUCE FROM THE SUMMER HAI	RVEST AND THE
SURPLUS OF PRODUCE FROM THE COMMUNITY GARDENERS WHO GO THRO	OUGH THE
GARDEN CLASSES.	
WE ALSO CONTINUED OUR LONG-TERM SUPPORT OF SLIM BUTTES AGR	CULTURAL
DEVELOPMENT PROGRAM, WHICH PLANTS AND DISTRIBUTES SEEDLING	S THROUGHOUT
PINE RIDGE. RUNNING STRONG GRANTS ALSO SUPPORTED THE YUCHI	LANGUAGE
PROJECT'S TRADITIONAL FOODS GARDEN IN SAPULPA, OK AND THE H	BRAVE HEART
SOCIETY'S GARDENS AND MEDICINAL PLANTS AT YANKTON IN LAKE A	NDES, SD.
CRITICAL IN-KIND NEEDS - IN ADDITION TO HEALTHY MEALS AND F	OOD, IN
FY22, RUNNING STRONG ALSO DISTRIBUTED THE FOLLOWING NEW ITE	MS TO HELP
NEEDY AMERICAN INDIAN CHILDREN:	
2,989 ELEMENTARY #STUDYSTRONG BACKPACKS FILLED WITH SCHOOL	SUPPLIES (24
CT. CRAYONS, ERASER, GLUE STICK, NOTEBOOK, PEN, NO. 2 PENCI	LS, RULER,
PENCIL SHARPENER, 5" SCISSORS, PAPER), 2,020 JR. HIGH AND H	IGH SCHOOL
#STUDYSTRONG BACKPACKS FILLED WITH SCHOOL SUPPLIES (2 POCKE	T FOLDERS, Schedule O (Form 990) 2021
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

Schedule O (Form 990) 2021 Name of the organization **Employer Identification number** AMERICAN INDIAN YOUTH RUNNING STRONG INC 54-1594578 NOTEBOOKS, LOOSE LEAF PAPER, ERASERS, COLORED PENCILS, PROTRACTORS, GLUE STICKS, NO. 2 PENCILS, RULER, HIGHLIGHTERS, RED & BLACK PENS, CALCULATOR, PENCIL POUCH, PENCIL SHARPENER) SO NATIVE STUDENTS HAVE THE TOOLS THEY NEED TO SUCCEED IN SCHOOL. 1,500 #WARMSTRONG ADULT COATS WITH HOODS, 3,000 #WARMSTRONG KIDS' COATS WITH HOODS, 4,175 #WARMSTRONG KIDS' GLOVES, 1,224 #WARMSTRONG ADULT GLOVES, 5,295 WINTER SOCKS AND 2,000 BLANKETS TO STAY SAFE AND WARM DURING HARSH WINTER WEATHER. 504 PAIRS OF #RUNSTRONG TODDLER ATHLETIC SHOES, 1,800 PAIRS OF #RUNSTRONG KIDS' SHOES, 1,800 PAIRS OF #RUNSTRONG ADULT ATHLETIC SHOES, AND 5,148 PAIRS OF ATHLETIC SOCKS WERE DISTRIBUTED TO NATIVE YOUTH JUST IN TIME FOR THE SUMMER MONTHS. ESSENTIAL (AND EXPENSIVE) BASICS INCLUDING 23,078 #SMILESTRONG DIAPERS AND 3,000 #SMILESTRONG DENTAL KITS (WITH TOOTHBRUSHES, TOOTHPASTE, FLOSSERS AND A TIMER) WERE DONATED FOR BETTER CHILD AND ORAL HEALTH, WHICH OFTEN SUFFERS IN IMPOVERISHED COMMUNITIES. ALONG WITH DISTRIBUTIONS DIRECTLY TO FAMILIES ON PINE RIDGE RESERVATION, THESE BRAND-NEW ITEMS (LISTED ABOVE) WERE DONATED TO MEET CRITICAL NEEDS TO 18 COMMUNITY PARTNERS IN 10 STATES ACROSS THE COUNTRY. THESE YOUTH SUPPORTIVE PROGRAM PARTNERS INCLUDED DIRECT DISTRIBUTION ON PINE RIDGE RESERVATIONS, BIILUUKE STRONG ON THE CROW RESERVATION IN MONTANA, BRUSHY CHEROKEE ACTION ASSOCIATION, YUCHI LANGUAGE PROJECT, RURAL COMMUNITIES INITIATIVE FOUNDATION, AND CHEROKEE

Schedule O (Form 990) 2021

NATION FOUNDATION IN OKLAHOMA, DENVER INDIAN CENTER AND DENVER INDIAN

FAMILY RESOURCE CENTER IN COLORADO, INDIAN YOUTH OF AMERICA IN IOWA,

AMERICAN INDIAN YOUTH RUNNING STRONG INC

Employer identification number 54-1594578

IOWA TRIBE OF KS & NE IN KANSAS, NEBO TITLE VI INDIAN EDUCATION PROGRAM

AND PROVO CITY SCHOOLS IN UTAH, INTERFAITH ACTION DEPARTMENT OF INDIAN

WORK IN MINNESOTA, KEYA FOUNDATION, JOE FOSS AT AXTELL PARK, AND SUMMIT

SCHOOL DISTRICT IN SOUTH DAKOTA, SACRED PIPE RESOURCE CENTER AND SPIRIT

LAKE TRIBAL HEALTH IN NORTH DAKOTA, AND TODAY WE FOLLOW TOMORROW WE

LEAD IN ARIZONA.

WATER - WATER IS A CRITICAL NEED AND THERE ARE STILL FAMILIES LIVING
WITHOUT ACCESS TO SAFE RUNNING WATER ON INDIAN RESERVATIONS. ON THE
PINE RIDGE INDIAN RESERVATION, OGLALA LAKOTA FAMILIES CAN LIVE WITHIN
YARDS OF THE MNI WICONI (WATER IS LIFE) WATER LINE WITHOUT FUNDS TO
SAFELY HOOK UP TO IT. IN FY22, RUNNING STRONG'S PINE RIDGE WATER
PROJECT PROVIDED HYDRANTS, WATER CONNECTIONS, PLUMBING REPAIRS AND
SEPTIC SYSTEMS TO 34 FAMILIES SO THAT THEY DID NOT HAVE TO CONTINUE TO
LIVE WITHOUT WATER (183 PEOPLE SERVED, 95 OF WHOM ARE CHILDREN). SOME
OF THESE OGLALA FAMILIES HAD LIVED WITHOUT RUNNING WATER FOR 17 YEARS
OR HAD TO HAUL IT FROM UP TO 20 MILES AWAY.

SAFE AND WARM HOMES - RUNNING STRONG IS COMMITTED TO PROVIDING SAFE

ENVIRONMENTS FOR NATIVE FAMILIES, INCLUDING THEIR OWN HOMES. WINTERS ON

THE PINE RIDGE INDIAN RESERVATION CAN BE BRUTAL WITH WINDCHILL

TEMPERATURES AS LOW AS 40 DEGREES BELOW ZERO. IT'S DANGEROUS COLD. TO

HELP STRETCH DOLLARS DURING THIS CRITICAL TIME, RUNNING STRONG MATCHES

OGLALA FAMILIES 1:2 FOR A \$300 TOTAL MATCH TOWARDS FILLING THEIR

PROPANE TANKS OR OFFSETTING THE COST OF THEIR HEATING BILLS. THIS

YEAR'S EMERGENCY HEAT MATCH ON PINE RIDGE PROVIDED HEATING ASSISTANCE

TO 909 FAMILIES, INCLUDING 94 VETERANS THOUGH OUR VETERANS MATCH (3,983

INDIVIDUALS, 1,811 OF WHOM ARE CHILDREN).

132212 11-11-21

Employer identification number 54-1594578

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

RUNNING STRONG ALSO NORTHERN KOHALA COMMUNITY RESOURCE CENTER'S MAUKA

TO MAKAI SUMMER CAMP, A CAMP FOR ELEMENTARY AND MIDDLE SCHOOL STUDENTS

TO LEARN ABOUT TRADITIONAL NATIVE HAWAIIAN ECOLOGICAL KNOWLEDGE, THE

SIGNIFICANCE OF CULTURAL AND HISTORICAL SITES IN NORTH KOHALA, AND

REFORESTATION, LAND MANAGEMENT, AND SAFE BOATING/FISHING PRACTICES.

TO HELP NATIVE CHILDREN ENJOY THE HOLIDAYS LIKE ANY OTHER CHILD, ALONG
WITH DONATING 2,400 BRAND NEW TOYS TO FAMILIES ON PINE RIDGE, RUNNING
STRONG DOUBLED OUR SUPPORT FOR HOLIDAY ACTIVITIES AND GIFT GIVING FOR
NATIVE YOUTH THIS YEAR. WE SUPPORTED HOLIDAY PARTIES AND ACTIVITIES
FOR INDIAN YOUTH OF AMERICA, TODAY WE FOLLOW TOMORROW WE LEAD, SUMMIT
AREA ECONOMIC GROWTH, BRUSHY CHEROKEE ACTION ASSOCIATION, SMEE SCHOOL
DISTRICT, NEBO TITLE VI INDIAN EDUCATION, AND OYATE TECA PROJECT.

DURING FY22, RUNNING STRONG ALSO FOCUSED ON THE CONSTRUCTION OF THE NEW
OYATE TA KOLA KU COMMUNITY CENTER THAT WE ARE BUILDING ON THE PINE
RIDGE INDIAN RESERVATION. THIS 21,000 SQUARE FOOT YOUTH CENTER WILL
OPERATE ALL THE YOUTH PROGRAMMING CONDUCTED THROUGH OUR PARTNER AND
NEWEST FIELD OFFICE, OYATE TECA PROJECT. WE WILL OFFER YOUTH RECREATION
ACTIVITIES IN A BRAND NEW GYM, FOOD PRESERVATION AND PREPARATION
CLASSES IN OUR CLASSROOMS AND COMMERCIAL KITCHEN, GARDEN CLASSES IN
CENTER AND ON THE GROUNDS IN THE MEDICINE ROOT GARDEN, ART AND CULTURE
CLASSES SUCH AS BEADING, SEWING, AND REGALIA MAKING. WE WILL BE
EXPANDING OUR AFTERSCHOOL AND SUMMER PROGRAMS FOR YOUTH AND COMMUNITY
MEMBERS, AS WELL AS OUR GARDEN AND FOOD PROGRAMS THAT SERVE THE

132212 11-11-21

RESERVATION.

LANGUAGE AND CULTURE - RUNNING STRONG CONTINUES TO SUPPORT CULTURE AND

LANGUAGE REVITALIZATION EFFORTS. RUNNING STRONG SUPPORTED THE AFRAID OF

BEAR/AMERICAN HORSE TIOSPAYE: RITES OF PASSAGE PROGRAM WHERE LAKOTA

ELDER MASTER TEACHERS BROUGH TOGETHER YOUNG WOMEN AND GIRLS TO TEACH

THE ART OF MAKING SACRED FOODS, THE PRAYERS AND CEREMONY BEHIND THIS

SACRED ART, AS WELL AS DOCUMENTING OTHER CULTURAL TEACHINGS THAT ARE

FOUNDATIONAL TO THE OGLALA LAKOTA PEOPLES OF THE PINE RIDGE

RESERVATION. WE ALSO SUPPORTED OGLALA LAKOTA SACRED FOODS PREPARATION

THROUGH SACRED HEALING CIRCLE AND YUCHI LANGUAGE PRESERVATION EFFORTS

THROUGH OUR 25 YEAR PARTNERSHIP WITH THE YUCHI LANGUAGE PROJECT IN

SAPULPA, OK.

SINCE 1994, RUNNING STRONG HAS SUPPORTED THE BRAVE HEART SOCIETY'S

EFFORTS IN THE YANKTON, OGLALA, SICANGU, HUNKPAPA, HUNKPATI, KUL

WICASA, SANTEE, SISSETON, MDEWANKTONWAN, SPIRIT LAKE, CHEYENNE RIVER

AND SIOUX VALLEY NATIONS. IN FY22, BRAVE HEART SOCIETY CONTINUED ITS

WORK INCLUDING THE CONTINUATION OF ITS MNI WIZIPAN WAKAN PROJECT TO MAP

OUT TRIBAL WATER RIGHTS, GARDEN TILLING AND PLANTING FOR FOOD

SOVEREIGNTY, SOCIAL ACTIVISM AND ISNATI/COMING OF AGE COMING OF AGE

CEREMONY FOR ADOLESCENT GIRLS. RUNNING STRONG ALSO OWNS THE BRAVE

HEART LODGE AND LEASES IT TO THE BRAVE HEARTS FOR \$1/YEAR.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

IN HONOR OF THE 50TH ANNIVERSARY OF BILLY'S OLYMPIC GOLD MEDAL IN 2014,

WE LAUNCHED THE DREAMSTARTER PROGRAM THAT WILL IDENTIFY 10 NATIVE YOUTH

EACH YEAR TO RECEIVE A \$10,000 GRANT FOR EACH DREAMSTARTER YOUTH AND

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	
Name of the organization  AMERICAN INDIAN YOUTH RUNNING STRONG INC	Page 2 Employer identification number 54-1594578
THEIR MENTOR ORGANIZATION TO MAKE A DREAM FOR THEIR COMMUN	ITY COME
TRUE.	
2022 DREAMSTARTERS RANGED FROM AGE 16 TO 30 AND REPRESENTED	D NINE (9)
DIVERSE TRIBAL COMMUNITIES: NAVAJO NATION, CHEYENNE RIVER	SIOUX TRIBE,
MUSCOGEE (CREEK) NATION, YERINGTON PAIUTE TRIBE, PISCATAWAY	Y_CONOY
TRIBE, CHEROKEE NATION, CATAWBA INDIAN NATION, AND WIIKWEMI	KOONG UNCEDED
TERRITORY. 2022 MENTOR ORGANIZATIONS INCLUDED MUSCOGEE (CE	REEK) NATION
MVSKOKE YOUTH SERVICES, SACRED PIPE RESOURCE CENTER, THROUGH	H PISCATAWAY
EYES, NEBO TITLE VI INDIAN EDUCATION, THE BEBELA PROJECT, N	NAVAJOSTRONG,
CATAWBA CULTURAL DIVISION, SIERRA ENDURANCE SPORTS, INDIGEN	OUS HEALTH &
WELLNESS CONNECTIONS, AND FAST BLACKFEET. THIS YEAR'S DREAM	ISTARTER
THEME WAS SOCIAL ACTION AND DREAMS RANGED FROM AN ANNUAL RU	UN TO HONOR
THE LOST AND THE SURVIVORS OF THE INDIAN BOARD SCHOOL ERA T	O WEEKLY
WORKSHOPS TO CONNECT NATIVE YOUTH IN URBAN AREAS TO THEIR C	ULTURE, AND
MUCH-NEEDED INFRASTRUCTURE SUPPORT FOR A STATE-RECOGNIZED T	RIBE ON THE
EAST COAST TO FOOD SOVEREIGNTY PROGRAMMING ON THE BLACKFEET	NATION.
EACH DREAMSTARTER IS ALSO ELIGIBLE TO APPLY FOR A "KEEP THE	DREAM
ALIVE" GRANT ONCE THEIR GRANT YEAR WAS COMPLETE. THESE OUTS	TANDING
NATIVE YOUTH ARE BUILDING A NETWORK OF COMMUNITY CHANGE WHI	CH WILL
STRENGTHEN INDIAN COUNTRY FOR GENERATIONS TO COME. FOR MORE	
INFORMATION, VISIT WWW.INDIANYOUTH.ORG/DREAMSTARTER.	

IN 2017, RUNNING STRONG LAUNCHED DREAMSTARTER TEACHER, A NEW GRANT THAT

GIVES NATIVE TEACHERS AND TEACHERS WHO TEACH NATIVE CHILDREN UP TO

\$1,000 TO MAKE A DREAM COME TRUE IN THEIR CLASSROOM. IN FY22, 28

TEACHERS WERE SELECTED WITH DREAMS RANGING FROM SUPPORTING ART

PROGRAMMING IN SCHOOLS TO BUILDING A MOBILE GREENHOUSE WITH STUDENTS IN

Schedule O (Form 990) 2021

COUNSEL, HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 8B:

RUNNING STRONG DOES NOT HAVE A COMMITTEE THAT ACTS ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11B:

AMERICAN INDIAN YOUTH RUNNING STRONG INC

**Employer identification number** 54-1594578

THE INTERNAL REVENUE SERVICE FORM 990 IS PREPARED BY A FIRM OF CERTIFIED PUBLIC ACCOUNTANTS WITH EXPERTISE IN TAX AND AUDIT ISSUES RELATED TO TAX-EXEMPT ORGANIZATIONS. THE FORM 990 IN DRAFT FORM IS SENT TO ALL MEMBERS OF THE BOARD OF DIRECTORS AND OFFICERS. THE DIRECTORS AND OFFICERS ARE INSTRUCTED TO SEND THEIR QUESTIONS, COMMENTS, AND SUGGESTIONS DIRECTLY TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE, STAFF AND THE AUDITOR, THEN MAKE A FINAL REVIEW OF THE DRAFT FORM 990. THE AUDIT COMMITTEE ADDRESSES ANY CONCERNS AND RESPONDS TO THE COMMENTS OF DIRECTORS AND OFFICERS PRIOR TO SUBMISSION OF THE FEDERAL FORM 990 TO THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

RUNNING STRONG HAS ADOPTED A DETAILED WRITTEN CONFLICT OF INTEREST POLICY WHICH DEFINES CONFLICTS OF INTEREST AND REQUIRES OFFICERS, DIRECTORS, AND KEY EMPLOYEES AFFIRMATIVELY AND PROMPTLY TO DISCLOSE ALL AND ANY POTENTIAL CONFLICTS. COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY IS MANDATORY, REQUIRING ALL PERSONS SUBJECT TO THE CONFLICT OF INTEREST POLICY TO ANNUALLY SIGN A STATEMENT AFFIRMING THAT THEY ARE FAMILIAR WITH THE TERMS OF THE POLICY. THE POLICY REQUIRES ALL PERSONS SUBJECT TO THE POLICY TO PROVIDE ANNUALLY WRITTEN RESPONSES TO A QUESTIONNAIRE ENTITLED "CONFLICT OF INTEREST DISCLOSURE STATEMENT." ALL PERSONS SUBJECT TO THE CONFLICT OF INTEREST POLICY ARE OBLIGATED BY THE POLICY TO PROMPTLY INFORM THE CHAIR OF THE BOARD OF DIRECTORS OF ANY MATERIAL CHANGE THAT DEVELOPS WITH REGARD TO THEIR DISCLOSURE STATEMENT WHICH IS DISTRIBUTED TO DIRECTORS AND OFFICERS AT THE ANNUAL MEETING OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, WA, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, VA 132212 11-11-21 Schedule O (Form 990) 2021

Scriedule O (Form 990) 2021	Page 2
Name of the organization  AMERICAN INDIAN YOUTH RUNNING STRONG INC	Employer identification number 54-1594578
WV, WI, AK, CO, CT, ME, ND, OH, OK	
FORM 990, PART VI, SECTION C, LINE 19:	4
RUNNING STRONG MAKES PUBLICLY AVAILABLE ON ITS WEBSITE THE	MOST RECENT
AUDITED FINANCIAL STATEMENTS FOR THE PRECEDING THREE YEARS	AS WELL AS
PROVIDING A LINK TO THE GUIDESTAR'S WEBSITE, WHICH POSTS F	ORMS 990 FOR THE
THREE PRECEDING YEARS. UPON REQUEST, RUNNING STRONG ALSO M	AKES AVAILABLE
COPIES OF ITS ARTICLES OF INCORPORATION, BYLAWS, THE CONFL	ICT OF INTEREST
POLICY, AND COMPENSATION GUIDELINES.	
	<u> </u>

# SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

# Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Open to Public Inspection 2021

OMB No. 1545-0047

AMERICAN INDIAN YOUTH RUNNING STRONG INC ► Go to www.irs.gov/Form990 for instructions and the latest information.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Employer identification number 54-1594578

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Total income	(e) End-of-year assets		(f) Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part organizations during the tax year.	tions. Complete if the organization a	nswered "Yes" on Form 990,	Part IV, line 34, bo	N, line 34, because it had one or more related tax-exempt	or more related ta	ux-exempt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) ing controlled entity?	2(b)(13)
MERICANS HELPING AMERICANS INC				Jo Reliali		Yes	S 0
8301 RICEMOND HIGHWAY, \$ 100,			_		CHRISTIAN RELIEF SERVICES	IBF	
RA 1004050	CHARITABLE	VIRGINIA 5	501(C)(3)	LINE 7	CHARITIES, INC.	.3	×
3301 RICHMOND HIGHWAY, # 900					CHRISTIAN RELIEF SERVICES	IBF	
- Son	CHARITABLE	VIRGINIA 5	501(C)(3)	LINE 7	CHARITIES, INC.		×
54-1884520, 8301 RICHMOND HIGHWAY, # 300,					CHRISTIAN RELIEF SERVICES	IBF	
	CHARITABLE	VIRGINIA 5	501(C)(3)	LINE 7	CHARITIES, INC.		×
HARISTIAN RELIEF SERVICES OF VIRGINIA -					- Z		
NDRIA, VA 22309	CHARITABLE	VIRGINIA 5	501(C)(3)	LINE 10	CHARITIES, INC.	:*	×
or Danamurak Parkingtion And Nation and the Indian			١	L	ATT COURTED	<u>;</u>	Þ

duction Act Notice, see the instructions for Form 990.

Schedule R (Form 990) 2021

Part II Continuation of Identification of Related Tax-Exempt Organizations

81-1158715, 8301 RICHMOND HIGHWAY, # 460, ALEXANDRIA, VA 22309	[   [		450 /21ST CE 59, 8301 59, 8301	ALEXANDRIA, VA 22309  CRSC RESIDENTIAL, INC 54-2041807  8301 RICHMOND HIGHWAY, # 800  ALEXANDRIA, VA 22309  CRS HOUSING PRESERVANTON THE - 71-1031988	HOUSING CORPORATION - 54-1779171, 8301 RICHMOND HGHWY, \$ 710, ALEXANDRIA, VA 2 CRS SCOTTSDALE HOUSING CORPORATION - 54-1990752, 8301 RICHMOND HIGHWAY, \$ 745 ALEXANDRIA, VA 22309 CRS FOUNTAIN PLACE HOUSING CORPORATION -	54-1922277, 8301 RICHMOND HIGHWAY, # 705, ALEXANDRIA, VA 22309 CHRISTIAN RELIEF SERVICES KANGAS APPOPLABLE	CHRISTIAN RELIEF SERVICES CHARITIES, INC 52-1394775, 8301 RICHMOND HIGHWAY, \$ 999 ALEXANDRIA, VA 22309	(a) Name, address, and EIN of related organization
CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE ND CHARITABLE	CHARITABLE CHARITABLE	22309 CHARITABLE 5, CHARITABLE	CHARITABLE	CHARITABLE	(b) Primary activity
VIRGINIA	ARIZONA	ARIZONA	VIRGINIA VIRGINIA	ARIZONA VIRGINIA	KANSAS ARIZONA	VIRGINIA	VIRGINIA	(c) Legal domicile (state or foreign country)
501(c)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3) 501(C)(3)	501(c)(3) 501(c)(3)	501(C)(3)	501(C)(3)	(d) Exempt Code section
LINE 10	LINB 10	LINE 10	LINE 10	LINE 10	LINE 10	LINE 10	LINE 7	(e) Public charity status (if section 501(c)(3))
CHRISTIAN RELIEF SERVICES CHARITIES, INC.	CHRISTIAN RELIEF SERVICES CHARITIES, INC.	CHRISTIAN RELIEF SERVICES CHARITIES, INC. CHRISTIAN RELIEF SERVICES CHARITIES, INC.	CHRISTIAN RELIEP SERVICES CHARITIES, INC. CHRISTIAN RELIEF SERVICES CHARITIES, INC.	CHRISTIAN RELIEF SERVICES CHARITIES, INC. CHRISTIAN RELIEF SERVICES CHARITIES, INC.	CHRISTIAN RELIEP SERVICES CHARITIES, INC. CHRISTIAN RELIEP SERVICES CHARITIES, INC.	CHRISTIAN RELIEF SERVICES CHARITIES, INC.	N/A	(f) Direct controlling entity
×	×	××	××	××	××	×	X A	

Part II Continuation of Identification of Related Tax-Exempt Organizations

122000									2.00			- 1	85-3849183, 8301 RICHMOND HIGHWAY	CRS FLORENCE HOUSING CORPORATION -	ALEXANDRIA, VA 22309	83-3955056, 8301 RICHMOND HIGHWAY,	CRS GARDEN PINES HOUSING CORPORATIONS -	ALEXANDRIA, VA 22309		CRS SKYLING HOUSING CORPORATION - 83-2720270	ALEXANDRIA, VA 22309		CRS PETERSBURG HOUSING CORPORATION, INC	ALEXANDRIA, VA 22309	82-0955164, 8301 RICHMOND HIGHWAY, # 775,	CRS IRONWOOD HOUSING CORPORATION	ALEXANDRIA, VA 22309	81-4283891, 8301 RICHMOND HIGHWAY, # 774,			of related organization	Name, address, and EIN	le)
			12.5							•	CHARITABLE		-		CHARITABLE	,		CHARITABLE			CHARITABLE			CHARITABLE			CHARITABLE					(b) Primary activity	- ALL
											VIRGINIA				VIRGINIA	•		VIRGINIA			VIRGINIA			ARIZONA			ARIZONA				foreign country)	(c) Legal domicile (state or	
											501(C)(3)				CHARITABLE	501(C)(3) -		CHARITABLE	501(C)(3) -		501(C)(3)			501(C)(3)			501(C)(3)				section	(d) Exempt Code	
											LINE 10				LINE 10			LINE 10			LINE 10			LINE 10			LINE 10			501(c)(3))	status (if section	(e)	
											CHARITIES, INC.	SERVICES	CHRISTIAN KELIEF	TOTAL CONTRACTOR	CHARITIES INC	SERVICES	rali	CHARITIES INC	SERVICES	CHDICALIAN DELICE	n	CHALOTIAN KELLER	CONTRACTO, ANG.	A	REPUTORS		CHARITIES INC	SERVICES	CHRISTIAN RELIEF		entity	Direct Controlling	
-					i		-				×			3	∢			×		•	4		•	4		<b>*</b>	*		100	Yes No	controlled organization?	(g) Section 512(b)(13)	

Schedule R (Form 990) 2021 AMERICAN INDIAN YOUTH RUNNING STRONG INC

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related				77	8							13				Name, address, and EIN of related organization	(2)	
anizations Taxable as		 ¥-	ii)													Primary activity	<u>(</u>	
a Corpor														,	(state or foreign	domicile	<u>0</u>	
ration or Trust. Co		12									4				y and	Direct controlling	<b>(</b> 2)	
mplete if the organizatio													-		excluded from tax under sections 512-514)	Predominant income	(0)	
n answered "Yes"									93						T COLLEGE	Ş	3	
on Form 990, Pa									*						end-on-year assets	Share of	<u>(9</u>	
rt IV. line :	_		+			1	_	_		7				Yes No		Disproportionate	3	
34, because it had on						+					_			N-1 (Form 1065)	amount in box 20 of Schedule	Code V-UBI	(0)	
			$\pm$			+				$\frac{1}{1}$		_		Yes No	partner?	General or	9	
'e related															partner? ownership	Percentage	2	

organizations treated as a corporation or trust during the tax year.

											of related organization	Name address and Elvi
											Frimary activity	( <del>b</del> )
										country)	Legal domicile (state or foreign	(0)
											(state or foreign	(d)
	_										Type of entity (C corp, S corp, or trust)	(0)
											Share of total income	3
										10000	Share of end-of-year	(9)
											<del>g</del> ige	3
			+	_		 	+	_	MO	Vac Na	512(b)(13) 512(b)(13) controlled entity?	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

						(a) Name, address, and EIN of entity
		, v.	e .		*	(b) Primary activity
						(c) Legal domicile (state or foreign country)
			5 5 5 5		0	Predominant income (related, unrelated, excluded from tax under sections 512-514)
						(e) Are all partners sec. 501(c)(3) ergs./ Yes No
						(f) Share of total income
						(g) Share of end-of-year assets
}	 					(h) Disproportionate allocations? Yes No
						(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)
+						General or managing partner?
						(k) Percentage ownership

VII Supplement	<b>al information</b> al information for responses t	o questions on Schedule R. S	NNING STRONG INC	
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