990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

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

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

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

Open to Public Inspection

For the 2023 calendar year, or tax year beginning , 2023, and ending , 20 C Name of organization Lake Travis Youth Association D Employer identification number Check if applicable: 74-1992172 Doing business as Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Room/suite (512)261-1900 2101 Lakeway Blvd 115 Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code 4,119,762 Austin, TX, 78734 **G** Gross receipts \$ Amended return **H(a)** Is this a group return for subordinates? ☐ **Yes X No** F Name and address of principal officer: Duncan Clowe Application pending 2101 Lakeway Blvd, Austin, TX, 78734 **H(b)** Are all subordinates included? Yes Tax-exempt status: **X** 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or If "No," attach a list. See instructions. Website: H(c) Group exemption number Form of organization: X Corporation Trust Association L Year of formation: 1978 M State of legal domicile: TX Part I **Summary** Briefly describe the organization's mission or most significant activities: LTYA is a youth sports association that offers baseball, basketball, cheer, football, golf, soccer, softball, tennis, and volleyball to Activities & Governance participants. Check this box \Box if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 Number of voting members of the governing body (Part VI, line 1a) 15 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 8 6 6 1,000 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 **Prior Year Current Year** 167,444 221.980 8 Contributions and grants (Part VIII, line 1h). Revenue 3.421.660 3.885.761 9 Program service revenue (Part VIII, line 2g) 3,078 16,358 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 -4,33711 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 3,592,182 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,119,762 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 560.448 634.167 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2.784.156 3.330.128 3,344,604 3,964,295 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 247.578 155.467 Revenue less expenses. Subtract line 18 from line 12 19 Assets or designation of designation of the designa **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 4,134,498 4,153,059 1,540,957 1,403,179 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances. Subtract line 21 from line 20 2.593.541 2.749.880 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here Type or print name and title **Duncan Clowe President** Print/Type preparer's name Preparer's signature Date Check | if **Paid** self-employed P01388530 Arturo Montemayor III **Preparer** 74-2902112 MONTEMAYOR BRITTON BENDER PC Firm's name Firm's EIN Use Only (512)442-0380 2110 B Boca Raton Suite B 102 Austin TX 78747 Phone no. Firm's address May the IRS discuss this return with the preparer shown above? See instructions Yes No

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		-/				
Part	Ш	Statement of Program			Dort III	
1	Brie	Check if Schedule O cor fly describe the organization	· · · · · · · · · · · · · · · · · · ·	note to any line in this i	ranııı	<u> </u>
•		A is a youth sports association		ketball, cheer, football, golf,	soccer, softball, tennis, and v	olleyball to participants.
		,				, , ,
2	Did	the organization undertake	any significant progr	am services during the v	vear which were not listed	on the
_		r Form 990 or 990-EZ? .				· · Yes No
	If "Y	es," describe these new se	rvices on Schedule C).		
3		the organization cease co	onducting, or make	significant changes in	how it conducts, any p	rogram
		rices?				· · Yes X No
_		'es," describe these change				
4		cribe the organization's pro enses. Section 501(c)(3) an				
		total expenses, and revenue			or the amount of grante t	
4a	(Cod	de:) (Expenses S	1,644,793 incl	uding grants of \$) (Revenue \$	1,717,705)
	Provid	ling boys and girls soccer.				
	(Cod			uding grants of \$) (Revenue \$	526,797)
Р	rovidir	ng boys and girls baseball progr	ram.			
4-	(00)	do. \/[vnoness(174 706 incl	uding grants of C	\ /Dayanya f	E47 E00 \
	(Cod	ng boys and girls basketball pro		uding grants of \$) (Revenue \$	517,583)
	TOVIUI	ng boys and gins basketball pro	ogram.			
4d	Oth	er program services (Descri	be on Schedule (0.)			
			cluding grants of \$	0) (Revenue	e\$ 0)	
4e		al program service expense		690,371	,	

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×
			000	

Part	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		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b 28c		×
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29		×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 153		.03	140
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×			
	- · · · · · · · · · · · · · · · · · · ·						
b	If "Yes," enter the name of the foreign country						
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Ea		×			
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		×			
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the						
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods						
	and services provided to the payor?	7a					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
	required to file Form 8282?	7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year	-					
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7e 7f					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
a	Initiation fees and capital contributions included on Part VIII, line 12	-					
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter:	-					
a	Gross income from members or shareholders						
b	Gross income from other sources. (Do not net amounts due or paid to other sources	-					
	against amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
L	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						
С	Enter the amount of reserves on hand						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×			
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15					
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16					
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities						
17	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17					
	If "Yes," complete Form 6069.						

Form 990 (2023)

Scott Cronk

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 15 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 15 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . ¥ 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 X Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c 13 13 X Did the organization have a written document retention and destruction policy? X 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. **✗** Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. 2101 Lakeway Blvd Ste 115, Austin, TX, 78734

Form 990 (2023) Page **7**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(14) Kevin Putegnat Board Member

					C)					
(A)	(B)	(de r	not ch		ition	e than o	ano	(D)	(E)	(F)
Name and title	Average hours per week	box,	box, unless officer and			is both or/trust	an tee)	Reportable compensation	Reportable compensation from related organizations (W-2/	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) Duncan Clowe										
President	2	×		×				0	0	0
(2) Melanie Lockhart										
Treasurer	2	×		×				0	0	0
(3) Ryan Hahn										
Board Member	2	×						0	0	C
(4) Jenn Buck										
Secretary	1	×		×				0	0	С
(5) Bryan Bulte										
Board Member	1	×						0	0	С
(6) Jamal Alsaffar										
Board Member	1	×						0	0	C
(7) Scott Cronk										
Executive Director	40				×			134,167	0	С
(8) Josh Sanders										
Board Member	1	×						0	0	С
(9) Hunter Northcutt										
Board Member	1	×						0	0	С
(10) Spike McBride										
Board Member	1	×						0	0	С
(11) Wes Jones										
Board Member	1	×						0	0	О
(12) Rebecca Marks										
Board Member	1	×						0	0	С
(13) Meredith Piccirillo										
Board Member	1	×						0	0	С

Par	VII Section A. Officers, Directors,	Trustees,	Key	Em	plo	yee	s, an	d F	lighest Compe	ensated Emplo	yees (continued)
					(C)					
	(A) Name and title	(B) Average hours per week	box,	unles	neck ss pe	erson	e than of is both	n an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	'
(15)	Shiloh Newman										
Board	l Member	1	×						0	0	0
	Bonnie Mackey										
	Member	1	×						0	0	0
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1b	Subtotal		٠	٠.					134,167	0	0
C	Total from continuation sheets to Part	VII, Section	n A								
d	Total (add lines 1b and 1c) Total number of individuals (including bureportable compensation from the organic		d to th	nose	e list	ted	above	e) w	134,167 tho received mor	0 e than \$100,000	
											Yes No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>										3 ×
4	For any individual listed on line 1a, is the organization and related organizations	greater th									
5	individual	or accrue co					,		•		4 X
<u> </u>	for services rendered to the organization	? If "Yes," (compi	ete	Sch	nedi	ule J 1	or s	such person .		5 X
<u>Sect</u>	ion B. Independent Contractors Complete this table for your five high	nest comp	ensat	ed	inde	ene	ndent	CC	ontractors that r	received more	than \$100,000 of
•	compensation from the organization. Rep										
	(A) Name and business add	lress							(B) Description of serv	vices	(C) Compensation
2	Total number of independent contractor received more than \$100,000 of compens						ted to	th	nose listed abov	e) who	

Page 8

Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaig	ns .		1a					
ani	b	•								
عَ کِ	С	Fundraising events 1c								
fts r A	d	Related organization	Related organizations 1d							
i <u>a</u> 'g∣	е	Government grants								
Sir	f									
ig ig		and similar amounts not included above 1f		221,980						
ğ 🕏	g	Noncash contribution								
Contributions, Gifts, Grants, and Other Similar Amounts	_	lines 1a–1f			1g		224 222			
O	h	Total. Add lines 1a-	-1t .				221,980			
o l	0-					Business Code				
<u> </u>	2a									
gram Ser Revenue	b									
Z Z	c d									
gra Re	e									
Program Service Revenue	f	All other program se				561499	3,885,761	3,885,761		
-	g	Total. Add lines 2a-					3,885,761	2,222,		
	3	Investment income								
		other similar amounts)				16,358			16,358	
	4	Income from investr	nent d	of tax-exen	npt bo	ond proceeds				
	5	Royalties								
				(i) Rea	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b			_				
	C	Rental income or (loss)		_\	0		0			
	d 70	Net rental income o	r (ioss	(i) Securities		(ii) Other	0			
	7a	Gross amount from sales of assets		(i) Securi		(ii) Other				
		other than inventory	7a							
o l	b	Less: cost or other basis								
Revenue		and sales expenses .	7b							
eve	С	Gain or (loss)	7c		0	0				
	d	Net gain or (loss)					0			
Other	8a	Gross income from	m fu	ındraising						
0		events (not including								
		of contributions rep								
	_	1c). See Part IV, line			8a					
		Less: direct expens			8b		0			
		Net income or (loss) Gross income f			g eve	nts	0			
	Ja	activities. See Part I			9a					
	h	Less: direct expens			9b					
		Net income or (loss)				 2S	0			
		Gross sales of in								
		returns and allowances 10a								
	b	Less: cost of goods	sold		10b					
	С	Net income or (loss)) from	sales of ir	vento	ory	0			
S						Business Code				
eo e	11a									
scellaneo Revenue	b									
e Se l	С									
Miscellaneous Revenue	d	All other revenue					-4,337			-4,337
	e	Total. Add lines 11a					-4,337	0.005.704		40.001
	12	Total revenue. See	ınstr	uctions			4,119,762	3,885,761	0	12,021

Form 990 (2023) Page **10**

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Chook if Schodula O contains a response or note to any line in this Bart IV	

	Check if Schedule O contains a response	or note to any line	in this Part IX .		
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	134,167	93,917	33,542	6,708
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	464,217	324,952	116,054	23,211
9	Other employee benefits				
10	Payroll taxes	35,783	25,048	8,946	1,789
11	Fees for services (nonemployees):	30,103	23,040	0,540	1,709
	` ' '				
a	Management	40.005	7.405	0.000	500
b	Legal	10,665	7,465	2,666	533
C	Accounting	26,457		26,457	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) .				
	- · ·	1,103,705	1,103,705		
12	Advertising and promotion	75,945	53,162	18,986	3,797
13	Office expenses	148,996	104,296	37,250	7,450
14	Information technology	17,774	12,442	4,444	889
15	Royalties				
16	Occupancy	795,526	765,850	24,729	4,947
17	Travel	6,354	4,448	1,588	318
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	27,181	19,027	6,795	1,359
21	Payments to affiliates	, , , , ,	-,	-,	,
22	Depreciation, depletion, and amortization .	0			
23	Insurance	140,262	115,014	25,247	
24	Other expenses. Itemize expenses not covered	140,202	113,014	20,241	
27	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
_		404 450	404 450		
a	Uniforms	431,453	431,453		
b	Sports Equipment	120,057	120,057		
C	Tournament	198,080	198,080		
d	Credit Card Discounts	120,331	120,331		
е	All other expenses	107,342	84,492	19,040	3,808
25	Total functional expenses. Add lines 1 through 24e	3,964,295	3,583,739	325,744	54,809
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
					Form 990 (2023)

Part X Balance Sheet

1			Check if Schedule O contains a response or note to an	y line in this Par	tX		📙
2 Savings and temporary cash investments 2 3							
Pledges and grants receivable, net		1	Cash-non-interest-bearing		1,177,651	1	1,128,873
Accounts receivable, net		2				2	
Sequence of the second other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		3	Pledges and grants receivable, net	[3	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons (as defined under section 4958(h)(1)), and persons described in section 4958(c)(3)(B) (as and loans receivable, net (as and loans receivable,		4	Accounts receivable, net	[34,667	4	36,741
Comparison Com		5	trustee, key employee, creator or founder, substantial contri	ibutor, or 35%			
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Opter devenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities including federal income tax, payables to related third parties 26 Total liabilities not included on lines 17–24). Complete Part X of Schedule D 27 Texpensive that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 28 Equital stock or trust principal, or current funds 29 Total assets without donor restrictions 10 Total assets or fund balances 10 Total section 4958 (s)						5	
8		6	·	,		6	
8	Assets	7	Notes and loans receivable, net			7	
10a		8				8	
10a		9		-		9	
b Less: accumulated depreciation 10b 170,787 2,914,641 10c 2,976,150 11 Investments — publicity traded securities 11 11 11 12 11		10a	Land, buildings, and equipment: cost or other	Ī			
11 Investments—publicly traded securities 11 12 1 10 12 11 10 12 11 13 11 12 11 13 11 13 11 14 15 13 11 14 15 14 16 14 15 16 16 16 16 16 16 16		b			2.914.641	10c	2.976.150
12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 13 Intangible assets 14 15 Other assets. See Part IV, line 11 7,539 15 11,295 16 Total assets. Add lines 1 through 15 (must equal line 33) 4,134,498 16 4,153,059 17 Accounts payable and accrued expenses 3,814 17 11,074 18 Grants payable and accrued expenses 3,814 17 11,074 18 Grants payable 18 Grants payable 18 943,888 19 924,807 18 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 593,255 23 467,298 24 Unsecured notes and loans payable to unrelated third parties 593,255 23 467,298 24 Unsecured notes and loans payable to unrelated third parties 593,255 23 467,298 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 25 25 26 1,403,179 26 1,403,179 27 2,749,880 27 2,749,880 28 Net assets with donor restrictions 2,593,541 27 2,749,880 28 27 27,749,880 29 Capital stock or trust principal, or current funds 30 27 Retained earnings, endowment, accumulated income, or other funds 31 31 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 32 2,749,880 33 34 34 34 34 34 34 3			· · · · · · · · · · · · · · · · · · ·	-, -	2,0 : 1,0 : :		2,0.0,.00
13 Investments—program-related. See Part IV, line 11 14 11 14 11 14 14 15 14 15 15							
14 Intangible assets 14 15 15 16 17 15 16 17 17 17 17 18 18 18 19 19 19 19 19				-			
15 Other assets. See Part IV, line 11 7,539 15 11,295 16 Total assets. Add lines 1 through 15 (must equal line 33) 4,134,498 16 4,153,059 17 Accounts payable and accrued expenses 3,814 17 11,074 18 Grants payable 18 18 19 Deferred revenue 943,888 19 924,807 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 1,540,957 26 1,403,179 26 Total liabilities. Add lines 17 through 25 1,540,957 26 1,403,179 27 Net assets with donor restrictions 2,593,541 27 2,749,880 28 Organizations that follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 2,593,541 32 2,749,880 2,749,880 2,749,880 2,749,880 2,749,880 2,749,880 2,749,880 2,749,880 31 31 32 3,749,880 32 3,749,880 33 34,749,880 3		_	· -				
16 Total assets. Add lines 1 through 15 (must equal line 33)			-	7.539		11.295	
17				_			· · · · · · · · · · · · · · · · · · ·
18 Grants payable 18 18 19 Deferred revenue 943,888 19 924,807 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 25 25 25 25 25 25		_	<u> </u>				
19 Deferred revenue 943,888 19 924,807			, ,	-	5,011		,
Tax-exempt bond liabilities			• •	943.888		924.807	
21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		_					
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		_					
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	s						
Unsecured notes and loans payable to unrelated third parties	itie						
Unsecured notes and loans payable to unrelated third parties	pi					22	
24 Unsecured notes and loans payable to unrelated third parties	Lia	23	Secured mortgages and notes payable to unrelated third pa	rties	593,255		467.298
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D							,
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D							
26 Total liabilities. Add lines 17 through 25							
26 Total liabilities. Add lines 17 through 25 1,540,957 26 1,403,179 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 2,593,541 27 2,749,880 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 2,749,880			of Schedule D			25	
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions		26	Total liabilities. Add lines 17 through 25		1,540,957	26	1,403,179
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions	<u>ي</u>			1			
Net assets without donor restrictions	nce			´			
Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds	ala	27	Net assets without donor restrictions		2,593,541	27	2,749,880
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds	Ä	28	Net assets with donor restrictions			28	
29 Capital stock or trust principal, or current funds	Func			nere 🗌			
Paid-in or capital surplus, or land, building, or equipment fund	ō	29				29	
Retained earnings, endowment, accumulated income, or other funds . Total net assets or fund balances	ets					-	
32 Total net assets or fund balances	SS			-			
33 Total liabilities and net assets/fund balances	Ϋ́			_	2.593.541	-	2.749.880
	Š						

Form 990 (2023) Page **12**

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		4,119	9,762
2	Total expenses (must equal Part IX, column (A), line 25)		3,96	4,295
3	Revenue less expenses. Subtract line 2 from line 1		15	5,467
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		2,59	3,541
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			872
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		2,74	9,880
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			Ц
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
_				×
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.			
	•			
	Separate basis Consolidated basis Both consolidated and separate basis	Oh		×
b	Were the organization's financial statements audited by an independent accountant?	2b		
	separate basis, consolidated basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
C	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on	20		
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
Ju	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Ju		
~	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2023)

Lake Travis Youth Association 74-1992172

Statement - Line 24 E - All other expenses

Description	(A) Total expenses		(C) Management and general expenses	(D) Fundraising expenses
Miscellaneous	107,342	84,492	19,040	3,808
Total:	107,342	84,492	19,040	3,808

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

		Youth Association					74-19		
Par		Reason for Public Cha						ons.	
The c	_	zation is not a private founda		,		-	•		
1		church, convention of church					0(b)(1)(A)(i).		
2		school described in section		· ·		•			
3		hospital or a cooperative hospital or a coop	,	•			, , , ,	····	41
4	☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:								
5		n organization operated for		college or university	owned o	r operate	ad by a government	al unit o	described in
Ū		ection 170(b)(1)(A)(iv). (Com		college of university	owned c	Ороган	od by a government	ai aint c	acsonbed in
6		federal, state, or local govern	•	mental unit described	in secti o	on 170(b)	(1)(A)(v).		
7		n organization that normally	•					the ae	neral public
		escribed in section 170(b)(1)				J		. 3	
8	□А	community trust described in	n section 170(b)	(1)(A)(vi). (Complete	Part II.)				
9		n agricultural research organi				erated in	conjunction with a la	and-gra	nt college
	or ur	runiversity or a non-land-gra niversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the coll	ege or
10	X A	n organization that normally i	receives (1) more	than 33 ¹ /3% of its su	pport fro	m contrib	outions, membership	fees, a	nd gross
	SL	ceipts from activities related upport from gross investment	t income and uni	related business taxa	ble incon	nė (less se	ection 511 tax) from	busines	Ses
		equired by the organization a		•		•	•		
11		n organization organized and	•	•	-				_
12		n organization organized and ne or more publicly supported	•	-	•		,		
		e box on lines 12a through 12							
а		Type I. A supporting organ		• • • • • • • • • • • • • • • • • • • •			•		•
u		the supported organization							
		supporting organization. Y							
b		Type II. A supporting organ	nization supervis	ed or controlled in co	nnection	with its s	supported organizati	on(s), by	/ having
		control or management of				persons	that control or mana	age the	supported
		organization(s). You must	-	-					
С		Type III functionally integ						ally integ	grated with,
_	_	its supported organization(•		-			
d		Type III non-functionally into that is not functionally into							
		that is not functionally integrequirement (see instruction						u an au	entiveness
е		Check this box if the organ	•	•		-		. II. Tvo	- III
·		functionally integrated, or						ii, iypi	5 III
f	Ente	er the number of supported of						. [
g		vide the following information	-						
	(i) Nar	me of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary		Amount of
				(described on lines 1–10 above (see instructions))	,	ur governing ment?	support (see instructions)		support (see ructions)
						1			
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
Total							0		0

Schedule A (Form 990) 2023 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) **(b)** 2020 (a) 2019 (c) 2021 (d) 2022 (e) 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.MM.) . 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 **Total.** Add lines 1 through 3 0 0 4 0 0 0 0 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4 0 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 0 7 0 0 Amounts from line 4 0 0 0 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 0 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 0 0 **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 0 % 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 % 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Schedule A (Form 990) 2023 Page **3**

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

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

Secti	on A. Public Support			-	-	,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.	119,897	91,544	170,002	167,444	221,980	770,867
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	2,327,057	1,475,186	2,694,407	3,421,660	3,885,761	13,804,071
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	2,446,954	1,566,730	2,864,409	3,589,104	4,107,741	14,574,938
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .			13,031	39,985		53,016
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	13,031	39,985	0	53,016
8	Public support. (Subtract line 7c from	U	J	13,031	39,903	0	33,010
	line 6.)						14,521,922
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	2,446,954	1,566,730	2,864,409	3,589,104	4,107,741	14,574,938
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	541	1,677	1,762	3,078	16,358	23,416
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
С	Add lines 10a and 10b	541	1,677	1,762	3,078	16,358	23,416
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					-4,337	-4,337
13	Total support. (Add lines 9, 10c, 11,					-4,337	-4,557
14	and 12.)	2,447,495	1,568,407	2,866,171	3,592,182	4,119,762	14,594,017
organization, check this box and stop here							
Section C. Computation of Public Support Percentage							
15	Public support percentage for 2023 (line 8		•	3, column (f))		15	100 %
16	Public support percentage from 2022 Sch					16	100 %
	on D. Computation of Investment Inc				(5)	T .= 1	
17	Investment income percentage for 2023 (I			-		17	0.16 %
18	Investment income percentage from 2022 Schedule A, Part III, line 17						
19a	17 is not more than 33 ¹ / ₃ %, check this box						
b	331/3% support tests-2022. If the organiz	ation did not ch	neck a box on I	line 14 or line 1	9a, and line 16	is more than 3	3 ¹ /3%, and
20	line 18 is not more than 331/3%, check this be Private foundation. If the organization did	-		<u>=</u>			_

Schedule A (Form 990) 2023 Page **4**

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

CCLI	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization Y?" "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer 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	5a		
	designated in the organization's organizing document?	5b		
6	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 .	5c 6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. *Complete line 2 below.* The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2023 Page **6**

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1	\square Check here if the organization satisfied the Integral Part Test as a qualifying	j tru	st on Nov. 20, 1970 (explair	n in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Section	ns A through E.
Sect	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4	0	0
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	0
Sect	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	0	0
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3	0	0
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	0	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6	Multiply line 5 by 0.035.	6	0	0
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8	0	0
Sect	tion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2	Enter 0.85 of line 1.	2		0
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4	Enter greater of line 2 or line 3.	4		0
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		0
7	☐ Check here if the current year is the organization's first as a non-functional	_	integrated Type III supporting	
•	(see instructions)	y		.g Jigainzanon

Schedule A (Form 990) 2023 Page **7**

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 0 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 0 9 10 0 10 Line 8 amount divided by line 9 amount (ii) (iii) **Distributable** Section E—Distribution Allocations (see instructions) **Underdistributions Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 0 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 **a** From 2018 From 2019 **c** From 2020 **d** From 2021 From 2022 Total of lines 3a through 3e 0 Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 0 Distributions for 2023 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. 0 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 0 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 0 Excess distributions carryover to 2024. Add lines 3j and 4c. 0 Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990)

Name of the organization

Lake Travis Youth Association

Schedule of Contributors

Employer identification number

74-1992172

Department of the Treasury Internal Revenue Service Go to www.irs.

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

2023

OMB No. 1545-0047

Organization type (check 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 a private foundation ☐ 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization
Lake Travis Youth Association

Employer identification number 74-1992172

Part I	Contributors (see instructions).	Use duplicate copies of	of Part I if additional space is needed.
--------	----------------------------------	-------------------------	--

(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
1	Dick's Sporting Goods 345 Court Street Coraopolis PA 15108	\$5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
	Clty of Bee Cave 4000 Galleria Parkway Austin TX 78738	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
3	Benevity 611 Meredith Road NE Calgary AB T2E2W5 CA	\$5,419	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
4	City of Lakeway 1102 Lohmans Crossing Road Austin TX 78734	\$25,000	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
5	Sage Industries 6700 Woodland Parkway Spring TX 77382	\$20,000	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
		\$	Person	

Name of organization

Lake Travis Youth Association

Employer identification number 74-1992172

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization **Employer identification number** Lake Travis Youth Association 74-1992172 Part III 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 information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held fŕom Part I (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 (a) No. (c) Use of gift (b) Purpose 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)

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.

OMB No. 1545-0047
2023

Open to Public Inspection

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

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

	ravis Youth Association			74-1992172
Par		and Euroda ar Othar	Similar Fund	
rai	Complete if the organization answered "			s or Accounts
	Complete if the organization answered	(a) Donor advised		(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised	u iulius	(b) I unds and other accounts
2	Aggregate value of contributions to (during year) .			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a	Ladvisors in writing that	the assets help	d in donor advised
	funds are the organization's property, subject to the			
6	Did the organization inform all grantees, donors, an			
	only for charitable purposes and not for the benefit			
	conferring impermissible private benefit?			· · · · · · □ Yes □ No
Par	t II Conservation Easements			
	Complete if the organization answered "	Yes" on Form 990, Pa	art IV, line 7.	
1	Purpose(s) of conservation easements held by the o	rganization (check all tl	hat apply).	
	☐ Preservation of land for public use (for example, recrea	ation or education)	Preservation of	a historically important land area
	☐ Protection of natural habitat		Preservation of	a certified historic structure
	☐ Preservation of open space			
2	Complete lines 2a through 2d if the organization hel	d a qualified conservati	ion contribution	in the form of a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Year
а				
b	Total acreage restricted by conservation easements			
c d	Number of conservation easements on a certified hi Number of conservation easements included on line			
u	on a historic structure listed in the National Register			
3	Number of conservation easements modified, trans			inated by the organization during the
3	tax year	ierreu, reieaseu, extirig	juished, or term	illated by the organization during the
4	Number of states where property subject to conserv	ation easement is loca	ited	
5	Does the organization have a written policy regard			ection, handling of
	violations, and enforcement of the conservation eas			
6	Staff and volunteer hours devoted to monitoring, inspec-	ting, handling of violation	ns, and enforcing	conservation easements during the year
	<i>-</i>	0,	,	Ç,
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations,	and enforcing c	onservation easements during the year
8	Does each conservation easement reported on line			
•	and section 170(h)(4)(B)(ii)?			· · · · · · · · · Yes No
9	In Part XIII, describe how the organization reports consheet, and include, if applicable, the text of the footing			
	organization's accounting for conservation easemer	_	13 III al Iolai Stat	ements that describes the
Part			reactures or C	Other Similar Assets
rait	Complete if the organization answered "			Julei Sillillai Assets
1a				statement and halance sheet works
	of art, historical treasures, or other similar assets			
	service, provide in Part XIII the text of the footnote to	•		•
b	If the organization elected, as permitted under FAS	B ASC 958, to report i	in its revenue st	atement and balance sheet works of
	art, historical treasures, or other similar assets held			
	provide the following amounts relating to these item	S.		
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art,	historical treasures, or	r other similar a	assets for financial gain, provide the
	following amounts required to be reported under FA	_		
а	Revenue included on Form 990, Part VIII, line 1 .			\$
b	Assets included in Form 990, Part X			

Schedu	e D (Form 990) 2023								Page 2
Part	•								
3	Using the organization's acquisition, a collection items (check all that apply).		ner reco	rds, chec	k any of the	following that make	significa	nt use	of its
а	☐ Public exhibition		d	☐ Loan	or exchange	program			
b	☐ Scholarly research		е	☐ Other		·			
С	☐ Preservation for future generations								
4	Provide a description of the organizat XIII.	tion's collections a	nd expl	ain how tl	ney further th	e organization's exe	empt pur	pose i	n Par
5	During the year, did the organization assets to be sold to raise funds rather							res [☐ No
Part	IV Escrow and Custodial Arra	angements							
	Complete if the organization 990, Part X, line 21.	answered "Yes"	on For	m 990, F	Part IV, line 9	9, or reported an a	mount o	on For	rm
1a	Is the organization an agent, trustee, included on Form 990, Part X?							Yes [☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fo	ollowing ta	able.				
	· · · · · · · · · · · · · · · · · · ·	·		_			Amount		
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			0
2a	Did the organization include an amour	nt on Form 990, Pa	ırt X, line	e 21, for e	scrow or cus	todial account liabili	ty? 🗌 🗅	es [☐ No
	If "Yes," explain the arrangement in Pa	art XIII. Check here	if the e	xplanation	n has been pi	rovided in Part XIII		<u>. [</u>	
Par	EV Endowment Funds								
	Complete if the organization								
		(a) Current year	(b) Pr	ior year	(c) Two years I	oack (d) Three years ba	ick (e) Fo	our years	back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance	0		0		0	0		0
2	Provide the estimated percentage of t	-	d baland	ce (line 1g	, column (a))	held as:			
а	Board designated or quasi-endowmer	nt9	6						
b	Permanent endowment	%							
С	Term endowment%								
_	The percentages on lines 2a, 2b, and								
3a	Are there endowment funds not in the	e possession of the	e organ	zation tha	at are held ar	nd administered for	the	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T
	organization by:							Yes	No
							. 3a(_	
	(ii) Related organizations?						. 3a(i		
b	If "Yes" on line 3a(ii), are the related of	•					. 3b		
4	Describe in Part XIII the intended uses		n's end	owment fu	ınds.				
Part	, , ,		on Fa	m 000 F	Oort IV/ line :	11a Coo Earm 000) Dort V	' lina	10
	Complete if the organization			1			-	-	
	Description of property	(a) Cost or oth (investme	ent)	(0	r other basis ther)	(c) Accumulated depreciation	(a) B	ook valu	
1a	Land		332,131					33	32,131
b	Buildings								0
С	Leasehold improvements								0
d	Fauipment	1 2	,814,806	1	1	170,787		2,64	44,019

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) .

e Other

0

2,976,150

Schedule D (Form 990) 2023 Page **3**

Part VII	Investments – Other Securities Complete if the organization answered "Yes" on Fore	m 990. Part IV. line	e 11b. See Form 9	990. Part X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	od of valuation: f-year market value
(1) Financial	derivatives			
(2) Closely h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, line 12, col. (B))	0		
Part VIII	Investments—Program Related Complete if the organization answered "Yes" on Form	m 990, Part IV, line	e 11c. See Form 9	990, Part X, line 13.
	(a) Description of investment	(b) Book value		nd of valuation: f-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, line 13, col. (B))	0		
Part IX	Other Assets			
	Complete if the organization answered "Yes" on For	m 990, Part IV, line	e 11d. See Form 9	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) T · · · (0 · /	(I) / 15 000 B / V // 45 / (B)			
Part X	mn (b) must equal Form 990, Part X, line 15, col. (B))	000 D + 11/4 11		- 000 D 1 V
	Complete if the organization answered "Yes" on Forline 25.	m 990, Part IV, line	e lie or lif. See	Form 990, Part X,
<u>1</u>	(a) Description of liability			(b) Book value
(1) Federal ir	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	7. 7. 7. 7. 7. 7. 7. 7.			
	mn (b) must equal Form 990, Part X, line 25, col. (B))			(
	r uncertain tax positions. In Part XIII, provide the text of the footnors iability for uncertain tax positions under FASB ASC 740. Check			

Schedule D (Form 990) 2023 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990. Part VIII, line 12: 2 Net unrealized gains (losses) on investments 2a Donated services and use of facilities h Recoveries of prior year grants 2e Subtract line **2e** from line **1** 3 0 3 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b Add lines **4a** and **4b** 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 0 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b 2c Other (Describe in Part XIII.) Add lines 2a through 2d 2e 0 3 Subtract line **2e** from line **1** 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines **4a** and **4b** 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). 0 **Supplemental Information** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Fo	orm 990) 2023	Page \$
Part XIII	Supplemental Information (continued)	
	The second second second	

SCHEDULE 0 (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

Lake Travis Youth Association		74-1992172		
Pt VI, Line 6:	Nominations to the Board of Directors must be voted upon by the Association Membership. A simple majority determines the winner-20 Association members are required to constitute a quorum.			
Pt VI, Line 7a:	Changes to the LTYA constitution presented by the LTYA BOD are subject Association members-20 Association members are required to constitute a			
	authority to call a meeting of the Association Membership, at which time Se membership of such a meeting with the LYTA Constitution changes to be p advance of such meeting.	ecretary notifies the Association		
Pt VI, Line 11b:	No review by the organization's governing body will be conducted prior to the	he Form 990 filing		
Pt VI, Line 12c:	All officers, staff and volunteers must disclose their conflict of interest or po Board or Executive Committee.	tential conflict of interest to the		
Pt VI, Line 15a:	Compensation of officers, directors, and top management officials is detern identical positions within other non-profit organizations with similar budgets			
Pt VI, Line 18:	Present in LTYA office and available for inspection upon request			
Pt VI, Line 19:	Present in LTYA office and available for inspection upon request.			
Part II, Line 4:	Football Program: Revenue \$395,742, Expenses: \$350,724; Lacrosse Prog \$280,396	gram: Revenue \$216,926, Expenses		

Cat. No. 51056K

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lame of the organization	Employer identification number	
Lake Travis Youth Association	74-1992172	