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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

A	For the	2008 calendar year, or tax year beginning AUG 1, 2008 and ending	JUL 31, 2009	
В	Check if applicable	Please use IRS	D Employer identific	cation number
	Addres change Name	print or INTERFAITH YOUTH CORE	30.0	212524
F	ichang	Doing Business As		212534
F	return Termin	See Specific Instruct 910 W. VAN BUREN See Specific Instruct 910 W. VAN BUREN 4TH	,	r 573-8832
F	ation Amend return		G Gross receipts \$	5,224,279.
F	Applic		H(a) Is this a group re	
	pendir	F Name and address of principal officer EBRAHIM PATEL	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates ind	cluded? Yes No
1	Tax-exe	empt status X 501(c) (3) ◄ (insert no) 4947(a)(1) or 527	If "No," attach a	list (see instructions)
<u>J</u> '	Websit	e: WWW.IFYC.ORG	H(c) Group exemptio	n number
		organization: X Corporation	Year of formation: 2002 N	A State of legal domicile: IL
P	art I	Summary		
ģ		Briefly describe the organization's mission or most significant activities: ${f THE} {f ORGA}$		
Governance	1 '		<u> AIRS, STRATEGI</u>	
ern		Check this box If the organization discontinued its operations or disposed of	more than 25% of its asset	
Š		Number of voting members of the governing body (Part VI, line 1a)	3	13
~		Number of independent voting members of the governing body (Part VI, line 1b)	4	13
Activities &		Total number of employees (Part V, line 2a)	5	30
ŧį	1	Total number of volunteers (estimate if necessary)	6	50
Ac		Total gross unrelated business revenue from Part VIII, line 12, column (C)	<u>7a</u>	0.
	D.	Net unrelated business taxable income from Form 990-T, line 34	7b	Current Year
		Contributions and grants /Part \/III line 1h\	Prior Year 874,768.	4,550,852.
Je	9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	291,071.	367,475.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	109,385.	<165,831.>
æ	10	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,216.	3,453.
		Total revenue : add lines & through 11 (must equal Part VIII, column (A), line 12)	1,278,440.	4,755,949.
		Grants and similar amounts paid (Part M. column (A), lines 1-3)	67,218.	71,659.
		Benefits paid to or for members (Part &, column (A), line 4)	0,,,,,,,	
ý	1	Salarie 2 other it hoe salo 2, employee benefits (Part IX, column (A), lines 5-10)	1,189,154.	1,530,253.
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Expenses	ь	Total fund aleing expenses (Part X column (D), line 25) 278,178.		
ú	17	Other experces (Par IX, Column (A), lines 11a-11d, 11f-24f)	910,924.	1,007,804.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,167,296.	2,609,716.
	19	Revenue less expenses Subtract line 18 from line 12	<888,856.	> 2,146,233.
Assets or	3		Beginning of Year	End of Year
Sset	20	Total assets (Part X, line 16)	3,056,266.	5,264,181.
et de	21	Total liabilities (Part X, line 26)	25,299.	128,157.
N Sec		Net assets or fund balances Subtract line 21 from line 20	3,030,967.	5,136,024.
P	art II	Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem	cents, and to the best of my knowled	an and halief it in true, correct
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any know		go and belief, it is true, correct,
e:~		572	I Max.	Zp 2010
2013 1013 1013 1013 1013 1013 1013 1013	 -	Signature of officer	Date	
2		EBRAHIM PATEL, PRESIDENT		
ල		Type or print name and title	<u></u>	
₽		Preparer's Date 1		er's identifying number structions)
		signature Pressure (2/4/)0	self- employed (see in:	sudctiona _j
—Şie	parer's	Firm's name (or MANN. WEITZ & ASSOCIATES L.L.C.	EIN ▶	
اللا	Unity	self-employed), address and 111 DEER LAKE ROAD, SUITE 125		
Z.		ZIP+4 DEERFIELD, IL 60015	Phone no. ▶ (847)267-3400
∯Ma	y the IF	Firm's name (or yours if self-employed), address, and ZIP+4 ASSOCIATES L.L.C. 111 DEER LAKE ROAD, SUITE 125 DEERFIELD, IL 60015 AS discuss this return with the preparer shown above? (see instructions) BOOK LINE FOR Privacy Act and Paperwork Reduction Act Notice, see the separate		X Yes No
٠	JO 1 12-1	Link Tol Tittacy Act and Taperwork Headetton Act Notice, see the separate		Form 990 (2008)
ത	S	EE SCHEDULE O FOR ORGANIZATION MISSION STATE	EMENT CONTINUA	TION \

4d Other program services (Describe in Schedule O)

(Expenses \$ 386,527. including grants of \$

) (Revenue \$ 341,713.)

Total program service expenses ▶ \$ 1,753,224. (Must equal Part IX, Line 25, column (B)

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4e

			Yes	<u>No</u>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	L	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as 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 US?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	X	-
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	45	x	
16	located outside the United States? If "Yes," complete Schedule F, Part II	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 total of Y art VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization operate one of more hospitals? If Pes, "Complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990 (้วบบลา

17020512 787606 0455 0

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?	ŀ		
	If "Yes," complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	Ì		
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?		•	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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		Х

Form **990** (2008)

Form 990 (2008)

INTERFAITH YOUTH CORE

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		1.55	
	U.S. Information Returns Enter 0 if not applicable	3		
b		ס		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming].		
	(gambling) winnings to prize winners?	1c	X	
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 3)		_
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>	ļ	X
b	If "Yes," enter the name of the foreign country. ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	1_		
_	Tax Shelter Transaction?	<u>5c</u>	 	37
	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۵.	1	
_	were not tax deductible?	6b		_
7	Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	,,,,		
•	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7		, .
	benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	1		
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8	ļ .	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	ļ	ļ
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	<u>9</u> b		ļ—
10	Section 501(c)(7) organizations. Enter N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b		4		
11	Section 501(c)(12) organizations. Enter: N/A			
a	Gross income from members or shareholders Cross income from members or shareholders 11a	\dashv		
D	Gross income from other sources (Do not net amounts due or paid to other sources against]	
10-	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	12a	 	1
D	in res, enter the amount of tax-exempt interest received of accrued during the year 11/A 120	L	990	(2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management		_	
		-	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			,
	processes, or changes in Schedule O. See instructions.			1
1a	Enter the number of voting members of the governing body 13 13	3		,
	Enter the number of voting members that are independent 1b 13	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1	<u> </u>	l
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		Х
7a	The state of the s			
-	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following	l		
а	The governing body?	8a	X	Ĺ
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a		9a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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 in Schedule O_	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		i i	
	in Schedule O how this is done	12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			l .
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	X	<u> </u>
b	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O (see instructions)			'
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		}	1 :
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ınd fina	ancial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ation	>	
	CHARLES LEVESQUE - 312-573-8826			
	910 W. VAN BUREN, 4TH FLOOR, CHICAGO, IL 60607			(2008)
83200 12-18	A	_		

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours			(O Posi	C) ition		-	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	individual trustee or director	institutional trustee			Highest compensated Exployee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
HOWARD MORGAN								_		
CHAIR	2.00	X	ļ	X	<u> </u>		ļ	0.	0.	0.
STEPHEN BELL										•
DIRECTOR	0.50	X	<u> </u>	ļ		 	-	0.	0.	0.
TAREK ELMASRY	1 00						Ì		•	0
DIRECTOR	1.00	X	┝			-		0.	0.	0.
WILLIAM ENRIGHT	0.50	٦,						0	0	0
DIRECTOR	0.50	X				-		0.	0.	0.
ROBERT GERTNER	0.50	پ						0.	0.	0.
DIRECTOR NEAL GOLDMAN	0.50	^	\vdash	 			╁	0.	0.	<u> </u>
DIRECTOR	0.50	.						0.	0.	0.
ANNE HALLETT	0.30	₽						0.		<u> </u>
DIRECTOR	0.50	v						0.	0.	0.
RON KINNAMON	0.50	^	\vdash			\vdash			0.	<u></u>
DIRECTOR	0.50	v						0.	0.	0.
JEFF LEVY	0.30	21	 	 			\vdash			<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
GAIL ROSSEAU										
DIRECTOR	1.00	x						0.	0.	0.
SUSAN THISTLETHWAITE										
DIRECTOR	0.50	x						0.	0.	0.
SUNIL GARG										
TREASURER	2.00	X		X				0.	0.	0.
EBRAHIM PATEL										
PRESIDENT	60.00			X				124,518.	0.	7,044.
APRIL MENDEZ										
VP OF PROGRAMS	60.00	<u> </u>		X			<u> </u>	85,733.	0.	4,849.
STEPHANIE PEDDICORD										_
VP OF DEVELOPMENT	50.00	<u> </u>	<u> </u>	X		_	<u> </u>	93,848.	0.	1,020.
CHARLES LEVESQUE									_	
COO	50.00	<u> </u>	 	Х			├-	105,725.	0.	4,849.
RICHARD VAN HEES	50.00									_
VP OF DEVELOPMENT	50.00	<u> </u>		X	<u> </u>		L	0.	0.	0 <u>.</u>

832007 12-18-08

Form **990** (2008)

Part VII Section A. Officers, Directors, T	<u>rustees, Key E</u>	mpl	oyee	s, a	nd	High	<u>iest</u>	Compensated Employ	ees (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	١.		Pos				Reportable	Reportable		l	timated	
	hours	(0	heck	all	that	app	oly)	compensation	compensati		l	nount c	ıf
	per week	į	İ					from the	from relate organization		l .	other pensat	ion
	, week	1 5				ated		organization	(W-2/1099-MI		1	om the	
		See	ruste			Suad		(W-2/1099-MISC)	(** = / ********************************	,	i e	anızatı	
		를 를	onal		e S	E CO B					and	d relate	:d
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	i i				orga	anızatıo	ns
		=	트	0	×	T 5	<u> </u>						
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		-	-		-	\vdash							
		<u> </u>				<u> </u>		100 004					
1b Total								409,824.		0.		7,76	<u>, Z</u> .
2 Total number of individuals (including tho	se in 1a) who re	eceiv	ed n	nore	tha	ın \$1	100,0	000 in reportable					_
compensation from the organization												Yes	<u>2</u> No
											$\overline{}$		
3 Did the organization list any former office			e, ke	y en	npio	yee,	or r	nignest compensated ei	nployee on				v
line 1a? If "Yes," complete Schedule J for											3		<u>X</u>
4 For any individual listed on line 1a, is the									tne organization	1			V
and related organizations greater than \$1											4		Х
5 Did any person listed on line 1a receive o	•			rom	an	y uni	reiat	ted organization for serv	ices rendered to	,	_		x
the organization? If "Yes," complete Schell Section B. Independent Contractors	equie u tor such	pen	son					· 			5		Λ_
	compensated	.do-	ond-	nt c		ract	oro +	that received more than	\$100,000 of co-	mnerr	eation f	rom	
1 Complete this table for your five highest of the organization NONE	Joinpensated Ir	iaeb	ende	aill C	JU11(iacii	UISI	mat received more man	ψ100,000 OI COI	ubelis	auUII I	10111	
								(B)			(C	<u>,, </u>	
(A) Name and busines	ss address							(B) Description of s	services	c	Compe		1
								<u> </u>		<u> </u>			
							\neg						
										İ			
									_				
							_						
							\neg						
2 Total number of independent contractors	(including thos	e in	1) w	ho r	ece	ved	mor	re than \$100,000 in com	pensation				
from the organization	0									<u> </u>			
											-	000	

Form **990** (2008)

Part IX | Statement of Functional Expenses

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

	All other organizations must compl	ete column (A) but are		ete columns (B), (C), and	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	7,458.	7,458.		·
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	46,800.	46,800.		
3	Grants and other assistance to governments,				•
	organizations, and individuals outside the US	4.5.404	4 7 404		
	See Part IV, lines 15 and 16	17,401.	17,401.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	252 424	006 056	114 600	45 400
	trustees, and key employees	358,494.	226,376.	114,629.	17,489.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	016 277	F02 006	150.060	171 510
7	Other salaries and wages	916,377.	593,996.	150,862.	171,519.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	141 451	05 205	20.000	12 220
9	Other employee benefits	141,451.	95,385.	32,828.	13,238.
10	Payroll taxes	113,931.	73,414.	23,684.	16,833.
11	Fees for services (non-employees)				
	Management	2 700	2.700		
	Legal	3,780.	3,780.	0.024	
	Accounting	16,274.	6,440.	9,834.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	72 244	12 746	40 770	10 720
_	Other	73,244.	13,746.	48,778.	10,720.
12	Advertising and promotion	100 701	64 202	20 012	26 605
13	Office expenses	129,701.	64,203.	28,813.	36,685.
14	Information technology	66,990.	59,446.	4,327.	3,217.
15	Royalties	101 [11		121,511.	
16	Occupancy	121,511.	400 210	2,346.	2 000
17	Travel	414,552.	409,218.		2,988.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	12 210	7 015	2 262	2 242
19	Conferences, conventions, and meetings	13,319.	7,815.	3,262.	2,242.
20	Interest				
21	Payments to affiliates	25 245		25 245	
22	Depreciation, depletion, and amortization	25,345. 10,413.		25,345. 10,413.	
23	Insurance	10,413.	-	10,413.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	BAD DEBT	117,500.	117,500.		
b	OTHER	7,871.	5,411.	994.	1,466.
С	STAFF DEVELOPMENT	5,771.	4,583.	688.	500.
d	SPECIAL EVENTS	1,533.	252.		1,281.
е					
f	All other expenses				
<u>25</u>	Total functional expenses. Add lines 1 through 24f	2,609,716.	1,753,224.	578,314.	278,178.
26	Joint Costs. Check here if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
92201	0 12-18-08	-			Form 990 (2008)

			(A)		(B)
_			Beginning of year		End of year
	1	Cash - non-interest-bearing	12,046.	1	263,968
	2	Savings and temporary cash investments	188,380.	2	1,554,896
	3	Pledges and grants receivable, net	401,470.	3	3,201,517
	4	Accounts receivable, net	72,501.	4	159,452
	5	Receivables from current and former officers, directors, trustees, key			
		employees, or other related parties. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section		ĺ	
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		-	
		Part II of Schedule L		6	
ets	7	Notes and loans receivable, net		7	<u>_</u>
Assets	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges	12,321.	9	24,324
	10a	Land, buildings, and equipment cost basis 10a 122, 404	1 •	ļ	
	ь	Less accumulated depreciation. Complete	_		
		Part VI of Schedule D 62,380		10c	60,024
	11	Investments · publicly traded securities	2,335,960.	11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,056,266.	16	5,264,181
	17	Accounts payable and accrued expenses	25,299.	17	128,157
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es S	21	Escrow account liability Complete Part IV of Schedule D		21	
Liabilitres	22	Payables to current and former officers, directors, trustees, key employees,		•	
ар		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	_
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	25,299.	26	128,157
		Organizations that follow SFAS 117, check here 🕨 🗓 and complete		ļ	
es		lines 27 through 29, and lines 33 and 34.			
a a	27	Unrestricted net assets	2,612,601.	27	1,926,271
3ali	28	Temporanly restricted net assets	418,366.	28	3,209,753
힏	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117, check here and	İ		
Net Assets or Fund Balances		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
e (32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	3,030,967.	33	5,136,024
	34	Total liabilities and net assets/fund balances	3,056,266.	34	5,264,181
Pa	rt XI	Financial Statements and Reporting			
					Yes No
1		ounting method used to prepare the Form 990 Cash X Accrual	Other		- <u></u>
2a		e the organization's financial statements compiled or reviewed by an independent			2a X
b		e the organization's financial statements audited by an independent accountan			2b X
¢		es" to lines 2a or 2b, does the organization have a committee that assumes res	•	audit	
		w, or compilation of its financial statements and selection of an independent ac			2c X
За		result of a federal award, was the organization required to undergo an audit or	audits as set forth in the Sing	le Aud	
		and OMB Circular A-133?			3a X
<u>b</u>	If "Ye	es," did the organization undergo the required audit or audits?			3b
92201	1 12 10				Form 990 (200)

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SOHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

30-0212534

		<u>INTERFA</u>	ITH YOUTH CO	RE					30	<u>-0212534</u>
Part I	Reason f	or Public Char	ity Status (All organiz	ations mu	st complet	e this part) (see inst	tructions)		
he organ	zation is not a	private foundation	because it is (Please ch	eck only o	ne organiz	ation)	· · · · · · · · · · · · · · · · · · ·			
1 📋			s, or association of churc				(b)(1)(A)(i)			
2 🔲	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)						
3 🗔			tal service organization of	-		170(b)(1)((A)(iii). (Att	ach Sche	dule H.)	
4	A medical res	earch organization	operated in conjunction	with a hos	pıtal descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital's name,
	city, and state	=			•				•	
5	•		benefit of a college or ur	niversity ov	wned or op	erated by	a governr	nental uni	describe	d in
	_	b)(1)(A)(iv). (Comple		•			-			
6 🔲	•		ent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).			
7 X	An organization	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general p	ublic described in
	-	b)(1)(A)(vi). (Comple								
8 🔲	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)					
9 🔲	An organization	on that normally rec	eives. (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershij	p fees, and	d gross receipts from
	activities relat	ted to its exempt fui	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of its	support fo	rom gross investment
	income and u	nrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization af	fter June 30, 1975
	See section !	509(a)(2). (Complete	the Part III)							
ю 🔲	An organizati	on organized and op	perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	I). (see ins	tructions)	
11 🗀	An organizati	on organized and op	perated exclusively for the	ne benefit (of, to perfo	rm the fur	actions of,	or to carry	y out the p	ourposes of one or
	more publicly	supported organiza	ations described in secti	on 509(a)(⁻	1) or section	on 509(a)(2	?). See se c	tion 509(a	a)(3). Ched	ck the box that
	describes the	type of supporting	organization and comple	et <u>e lin</u> es 1	1e through	11h				
_	a Type I		_ ,,		e III · Func	•	U			Type III - Other
e			it the organization is not							
			han one or more publicly						9(a)(1) or s	ection 509(a)(2)
f	If the organiza	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
		ganization, check the								<u> </u>
g	_		organization accepted ar							
			irectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (ıi) and (ııi) below,	Yes No
	-		upported organization?							11g(i)
			n described in (i) above?							11g(ii)
			person described in (i) o							11g(iii)
h	Provide the fo	ollowing information	about the organizations	the organ	ization sup	oports.				
			(iii) Type of	(iv) Ic the c	organization	(v) Did voi	u notify the	(vi) Is	the	
. ,	of supported	(ii) EIN	organization		sted in your		ion in col.	(vi) Is	on in col.	(vii) Amount of support
orga	anization		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S	.?	συρροιτ
			(see instructions))	Yes	No	Yes	No	Yes	No	
						-	_			
					_			<u> </u>		
_										
							<u> </u>			
otal					L		<u> </u>		<u>L</u>	
HA For I	Privacy Act an	d Paperwork Redu	ction Act Notice, see t	he Instruc	tions for F	orm 990.		Schedul	e A (Form	990 or 990-EZ) 200

Sec	ction A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	744,175.	512,634.	1106122.	874,768.	1654491.	4892190.
2	Tax revenues levied for the organ-	_					
	ization's benefit and either paid to					:	
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 - 3	744,175.	512,634.	1106122.	874,768.	1654491.	4892190.
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)						1422540.
6	Public Support. Subtract line 5 from line 4						3469650.
	ction B. Total Support		-				
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	744,175.	512,634.	1106122.	874,768.	1654491.	4892190.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,493.	7,615.	91,909.	113,847.	42,070.	256,934.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	174.	889.	5,414.	3,216.	3,453.	13,146.
11	Total support. Add lines 7 through 10						5162270.
12	Gross receipts from related activities,	etc (see instructi	ons)			12	843,455.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2008 (line 6, column (f) d	ivided by line 11, o	column (f))		14	67.21 %
15	Public support percentage from 2007	' Schedule A, Part	IV-A, line 26f			15	42.21 %
1 6 a	33 1/3% support test - 2008. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies		-				$\triangleright x$
t	33 1/3% support test - 2007. If the o	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual		• • •				
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	cts-and-circumstan	ices" test, check ti	his box and stop h	nere. Explain in Pa	rt IV how the organ	
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	d organization		
t	10% -facts-and-circumstances tes	t - 2007. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explair	n in Part IV how the	
	organization meets the "facts-and-circ		•	•			.
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	<u>a, 16b, 17a, or 17l</u>			
					Sche	edule A (Form 990	or 990-EZ) 2008

Section A. Public Support			1		-	
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ")						-
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 · 5 7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						-
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975				<u> </u>		
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for t	he organization	's first, second, thii	rd, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organiz	ation,
check this box and stop here	J					
Section C. Computation of Public	Support Pe	ercentage				
15 Public support percentage for 2008 (lin	e 8, column (f) o	divided by line 13,	column (f))		15	
16 Public support percentage from 2007 S	Schedule A, Parl	t IV-A, line 27g			16	
Section D. Computation of Invest	tment Incom	ne Percentage				
17 Investment income percentage for 200	8 (line 10c, colu	mn (f) divided by lii	ne 13, column (f))		17	
18 Investment income percentage from 20	007 Schedule A,	Part IV-A, line 27h			18	
19a 33 1/3% support tests - 2008. If the o				e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	d stop here. The	e organization qual	ifies as a publicly	supported organ	zation	▶□
b 33 1/3% support tests - 2007. If the o	•	-				and _
		A b The	anization avalifica	an a publicly sup	norted organization	
line 18 is not more than 33 1/3%, chec	k this box and s	stop nere. The orga	ariizatiori qualifies	as a publicly sup	ported organization	

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number 30-0212534

Pai	t I Organizations Maintaining Donor Advise		s or Accou	ints. Complete if the
	organization answered "Yes" to Form 990, Part IV, line			
		(a) Donor advised funds	(b) Fur	ds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			·
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	_	e used only	
	for charitable purposes and not for the benefit of the donor o	r donor advisor or other impermissible pr	vate benefit	Yes No
Pai				
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an his	storically imp	ortant land area
	Protection of natural habitat	Preservation of certification	ied historic st	ructure
	Preservation of open space			
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a con	servation eas	sement on the last day
	of the tax year			
	·			Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c_	
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d	
3	Number of conservation easements modified, transferred, rela		e organizatio	n during the taxable
	year >			
4	Number of states where property subject to conservation eas	sement is located >		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, violations, a	ınd	
	enforcement of the conservation easements it holds?			Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, ar	nd enforcing easements during the year	>	
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing easements during the year ► 🕏	S	
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170)(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense	e statement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes	the organiza	tion's accounting for
	conservation easements			
Pa	rt III Organizations Maintaining Collections of		Other Simil	ar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	palance sheet	works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	iblic service,	provide, in Part XIV, the text of
	the footnote to its financial statements that describes these i	tems		
þ	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balar	nce sheet wo	rks of art, historical treasures,
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	e, provide the	e following amounts relating to
	these items			
	(i) Revenues included in Form 990, Part VIII, line 1		>	\$
	(ii) Assets included in Form 990, Part X		>	\$ \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia		
	the following amounts required to be reported under SFAS 1	16 relating to these items		
а	Revenues included in Form 990, Part VIII, line 1		>	\$ \$
b	Assets included in Form 990, Part X		>	\$
LHA	For Privacy Act and Paperwork Reduction Act Notice, see	the Instructions for Form 990.		Schedule D (Form 990) 2008

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		HTUOY HTI					21253		ge 2
Par	rt III Organizations Maintaining C	ollections of A	rt, Historical T	reasures, c	or Othe	<u>er Similar As</u>	sets (conti	nued)	
3	Using the organization's accession and other	records, check any	y of the following th	nat are a signifi	cant use	e of its collection	items (chec	k all	
	that apply)								
а	Public exhibition	C	Loan or e	change progra	ams				
b	Scholarly research	€	e Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explai	in how they further	the organizati	on's exe	mpt purpose in F	Part XIV		
5	During the year, did the organization solicit or	receive donations	of art, historical tre	asures, or oth	er sımıla	r assets			
	to be sold to raise funds rather than to be ma						Yes	. L.	No
Par	rt IV Trust, Escrow and Custodial	-	Complete if orga	nızatıon answe	ered "Ye	s" to Form 990, F	Part IV, line !	9, or	
	reported an amount on Form 990, Par	t X, line 21							
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for contribution	ons or other as	sets not	included			
	on Form 990, Part X?					l	Yes		No
þ	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:						
							Amount	<u> </u>	
C	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2 a	Did the organization include an amount on Fo	orm 990, Part X, line	21?			Į.	Yes		No
	If "Yes," explain the arrangement in Part XIV								
Par	rt V Endowment Funds. Complete if	organization answer	ered "Yes" to Form	990, Part IV, I	ine 10				
		(a) Current year	(b) Prior year	(c) Two year	s back	(d) Three years ba	ck (e) Four	years l	oack_
1a	Beginning of year balance								
ь	Contributions								
С	Investment earnings or losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the year	end balance held a	as						
а	Board designated or quasi-endowment		%						
b	Permanent endowment	<u>%</u>							
С	Term endowment ▶	6							
За	Are there endowment funds not in the posse	ssion of the organiz	ation that are held	and administe	red for t	he organization	_		
	by						1	Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	on Schedule R?				3b		
4	Describe in Part XIV the intended uses of the	organization's ende	owment funds						
Par	rt Vi Investments - Land, Building	s, and Equipm	ent. See Form 99	0, Part X, line	10				
	Description of investment	(a) Cost or o	other (b) Co	st or other	(c) D	epreciation	(d) Bool	value	•
		basis (investi	ment) basi	s (other)					
1a	Land								
þ	Buildings								
С	Leasehold improvements								
d	Equipment		1	22,404.		62,380.	6	0,0	24.
_е	Other								
	Add lines to to (Column (d) should sound F	200 5 414 4	(0) 1 (0)					<u> </u>	2.4

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008

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_	dule D (Form 990) 2008 INTERFAITH YOUTH CORE			<u> 30-</u> 0	0212534	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Financ	ial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		4,755	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		2,609	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		2,146	233.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7		<41	<u>,176.</u> :
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net). Add lines 4-8		9			<u>.176.</u> :
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		2,105	<u>,057.</u>
	t XII Reconciliation of Revenue per Audited Financial Stateme	ents witi	n Revenue per F	1 1		722
1	Total revenue, gains, and other support per audited financial statements			1	4,867	134.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	ایا				
а	Net unrealized gains on investments	2a	111 702	- 1		
b	Donated services and use of facilities	2b	111,783.	4		
C	Recoveries of prior year grants	2c		-		
d	Other (Describe in Part XIV)	2d		ا - ر ۲	111	702
e	Add lines 2a through 2d			2e 3	4,755	<u>,783.</u>
3	Subtract line 2e from line 1			3	<u> </u>	, 242.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	45				
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV)	4a 4b		-		
b	Add lines 4a and 4b	10		4c		Ω
С 5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	4,755	949
5 Par	t XIII Reconciliation of Expenses per Audited Financial Statem	ents Wi	th Expenses per			,,,,,
1	Total expenses and losses per audited financial statements			1	2,721	.499.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					,
a	Donated services and use of facilities	2a	111,783			
b	Prior year adjustments	2b		1		
c	Losses reported on Form 990, Part IX, line 25	2c		1		
ď	Other (Describe in Part XIV)	2d		1		
e	Add lines 2a through 2d			2e	111	,783.
3	Subtract line 2e from line 1			3	2,609	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	2,609	
Pa	t XIV Supplemental Information					
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I	III, lines 1a	and 4, Part IV, lines	1b and	2b, Part V, line	4, Part
	rt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b				•	
					<u> </u>	
					 ;	_
			·····			
						
				_		

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

Open to Public Inspection

Name of the organization

Employer identification number

INTERFAITH YOU'				30-021253	
Part I General Info	ormation on A	ctivities Ou	tside the United States. Comp	lete if the organization answered "	Yes"
to Form 990, Pa	art IV, line 14b			· · · · · · · · · · · · · · · · · · ·	
1 For grantmakers. Doe	s the organization	n maintain recor	ds to substantiate the amount of the ${f g}$		
grantees' eligibility for	the grants or assi	stance, and the	selection criteria used to award the gr	ants or assistance?	Yes No
2 For grantmakers. Des	cribe in Part IV th	e organization's	procedures for monitoring the use of	grant funds outside the United Sta	tes
3 Activities per Region (<u>Use Schedule F-1</u>	(Form 990) if ac	dditional space is needed)		,
(a) Region	(b) Number of		(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
	offices	employees or	(by type) (i e , fundraising,	is a program service,	expenditures
	in the region	agents in region	program services, grants to recipients located in the region)	describe specific type of service(s) in region	in region
		region	recipients located in the region)	or service(s) in region	
				IFYC WAS IN THE UNITED	
				KINGDOM TO PROVIDE	
				TRAINING TO THE FAITHS	
EUROPE	C	0	PROGRAM SERVICE	ACT FELLOWS FROM THE US	63,891.
				IFYC HOSTED A DELEGATION	
				OF 8 YOUNG COMMUNITY	
				LEADERS FROM THE UK.	
EUROPE		o	PROGRAM SERVICE	THE DELEGATION STUDIED	38,418,
				IFYC TRAINERS TRAVELED	
				TO THE UNITED KINGDOM	
		}		AND WESTERN EUROPE AND	ł
EUROPE		0	PROGRAM SERVICE	PROVIDED TRAINING IN ITS	96,536.
				AWARD MINI GRANTS FOR	
				PROJECT INITIATIVES TO	
				FOSTER RELIGIOUS	
EUROPE			GRANTS TO RECIPIENTS	PLURALISM.	_21,440.
BURUFE		<u> </u>	GRAVIS TO RECIFIENTS	IFYC LED THE FAITHS ACT	
				FELLOWS TO THREE AFRICAN	
				COUNTRIES (MALI, MALAWI,	
ARRIGA			PROGRAM SERVICE	AND TANZANIA) TO LEARN	158 616.
AFRICA	<u> </u>	1	PROGRAM SERVICE	IFYC STAFF TRAVELED TO	138,010,
				CANADA TO MEET AND	
				RECRUIT ORGANIZATIONS TO	73.000
NORTH AMERICA		_0	PROGRAM SERVICE	HOST OUR FAITHS ACT	73,909.
]			
			-		
					1
		1			1
Totals	<u> </u>	L	1	<u> </u>	452 810
LHA For Privacy Act and P	aperwork Reduc	ction Act Notice	e, see the Instructions for Form 990.	Schedule F (Form 990) 2008

SEE PART IV FOR COLUMN (E) DESCRIPTIONS

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INTERFAITH YOUTH CORE Schedule F (Form 990) 2008

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of organizations section 501(c)(3) equivalency letter	organizations that are	e recognized as charities	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	which the grante	e or counsel has pro	ovided a		

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2008

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30-0212534

Page 3

INTERFAITH YOUTH CORE

Schedule F (Form 990) 2008

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Use Schedule F-1 (Form 990) if additional space is needed

(h) Method of valuation (book, FMV, appraisal, other)				-	Schedule F (Form 990) 2008
(g) Description of non-cash assistance					Sched
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
ance (b) Region					
(a) Type of grant or assistance					

Complete this part to provide the information required by Part I, line 2, and any other additional information

SCHEDULE F, PART I, LINE 2: IFYC AWARDS MINI GRANTS TO INDIVIDUALS AND
ORGANIZATIONS FOR PROJECTS AND INITIATIVES DESIGNED TO FOSTER RELIGIOUS
PLURALISM. IFYC REQUIRES MINI GRANT RECIPIENTS TO SUBMIT PROJECT REPORTS
THAT EXPLAIN HOW GRANT FUNDS WERE SPENT.

PART I, LINE 3, COLUMN (E):

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: IFYC WAS IN THE UNITED KINGDOM

TO PROVIDE TRAINING TO THE FAITHS ACT FELLOWS FROM THE US, CANADA AND THE

UK IN ADVANCE OF THEIR DEPARTURE TO AFRICA WHERE THEY STUDIED

COMMUNITY-BASED EFFORTS TO ERADICATE MALARIA.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: IFYC HOSTED A DELEGATION OF 8

YOUNG COMMUNITY LEADERS FROM THE UK. THE DELEGATION STUDIED IFYC

PROGRAMMING AND METHODOLOGY AND VISITED RELEVANT PROGRAMS AND LEADERS IN

CHICAGO AND WASHINGTON, D.C.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: IFYC TRAINERS TRAVELED TO THE

UNITED KINGDOM AND WESTERN EUROPE AND PROVIDED TRAINING IN ITS

METHODOLOGY AND THEORY OF RELIGIOUS PLURALISM AT UNIVERSITIES, CIVIC

ORGANIZATIONS AND OTHER INSTITUTIONS.

REGION: AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: IFYC LED THE FAITHS ACT

FELLOWS TO THREE AFRICAN COUNTRIES (MALI, MALAWI, AND TANZANIA) TO LEARN

ABOUT MALARIA ERADICATION EFFORTS. THE FELLOWS THEN RETURNED TO THEIR
832074 12-18-08 Schedule F (Form 990) 2008

Schedule F (Form 990) 2008 INTERFATTH YOUTH CORE 30-0212534 Page 4 Part IV Supplemental Information
Complete this part to provide the information required by Part I, line 2, and any other additional information
HOME COUNTRIES WHERE THEY DEVELOPED INTERFAITH PROGRAMS TO RAISE FUNDS
FOR AND AWARENESS OF MALARIA ERADICATION EFFORTS.
REGION: NORTH AMERICA
(E) SPECIFIC TYPES OF SERVICES IN REGION: IFYC STAFF TRAVELED TO CANADA
TO MEET AND RECRUIT ORGANIZATIONS TO HOST OUR FAITHS ACT FELLOWS WHO WERE
PLACED IN OTTAWA, TORONTO AND MONTREAL, AS THEY WENT ABOUT IMPLEMENTING
THEIR INTERFAITH MALARIA ERADICATION EFFORTS.

SCHEDULEI								OMB No 1545-0047	545-0047
(Form 990)			Grants and Governn	ants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations uals in the U.S.			5008	8
Department of the Treasury Internal Revenue Service	asury	▼ Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	n answered "Yes," on F	" on Form 990, Pa n 990.	rt IV, lines 21 or 22.		Open to Public Inspection	Public ction
Name of the organization	anization INTERFAITH YOUTH	l	CORE				Ш	Employer identification number $30-0212534$	on number 12534
Part Gene	General Information on Grants and Assistance								
1 Does the o	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	stance, and the selection		
critena use	criteria used to award the grants or assistance?	istance?						X Yes	2
2 Describe in	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	toring the use of grant	funds in the United	States				
Part II Gran	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	• United States. C	omplete if the orga	inization answered "Y	es" on Form 990, Part IV	V, line 21, for any	[
recip	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000 Check this	s box if no one recipien	it received more th	an \$5,000 Use Pa	rt IV and Schedule I-1	(Form 990) if additional	space is needed	×
1 (a) Name a	1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	grant e
2 Enter total	Enter total number of section 501(c)(3) and government organizations	and government or	ganizations					A	
3 Enter total	Enter total number of other organizations	SI						•	
LHA For Priva	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	action Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	n 990) 2008

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(Form 990) 2008 INTERFAITH YOUTH CORE Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Use Schedule I-1 (Form 990) if additional space is needed Schedule I (Form 990) 2008 Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FYC GAVE MINI GRANTS TO OTHER ORGANIZATIONS HROUGH OUR CONTRACT WITH SEARCH INSTITUTE, ORGANIZATIONS APPLYING FOR THE MINI GRANTS WERE EQUIRED TO COMPLETE APPLICATIONS AND 1FYC HAD A	21	46.800	0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: IFYC G	GAVE MINI	GRANTS TO	OTHER	ORGANIZATIONS	
THROUGH OUR CONTRACT WITH SEARCH I	INSTITUTE	. ORGANIZATIONS	- 1	APPLYING FOR THE	
MINI GRANTS WERE REQUIRED TO COMPLETE		APPLICATIONS A	AND IFYC HAD	D A SET OF	
CRITERIA FOR AWARDING THE MINI-GRANTS	•	IFYC MONITORED	ED PROJECTS	S THROUGH	
ITS AND PROJECT RE	WHICH INCLUDED	UDED PROJECT	CT DOCUMENTATION	TATION SUCH	
AS VIDEO CLIPS.					

COLUMN (A): PART III, (A) TYPE OF GRANT OR ASSISTANCE: IFYC GAVE MINI GRANTS TO OTHER

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SEE PART IV FOR COLUMN (A) DESCRIPTIONS

17020512 787606 0455 0

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

INTERFAITH YOUTH CORE

Employer identification number 30-0212534

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IMPLEMENTATION AND EVALUATION (SPIE), LEADERSHIP AND OUTREACH EDUCATION
AND TRAINING. IN THE AREA OF INTERNATIONAL PROGRAMS, IFYC IMPLEMENTED
ITS FAITHS ACT FELLOWS PROGRAM IN FY 2009. THIS PROGRAM, FUNDED BY THE
TONY BLAIR FAITH FOUNDATION, SEEKS TO UTILIZE INTERFAITH LEADERSHIP
TRAINING AND ORGANIZING TO ADVANCE THE MILLENNIUM DEVELOPMENT GOAL OF
THE ERADICATION OF DEATHS DUE TO MALARIA. SPECIFICALLY, 30 FAITHS ACTS
FELLOWS ARE WORKING IN THE US, CANADA AND THE UNITED KINGDOM TO RAISE
AWARENESS OF MALARIA AND BUILD INTERFAITH INITIATIVES TO COMBAT ITS
TOLL.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
DURING THE FISCAL YEAR, IFYC INAUGURATED THE FAITHS ACT FELLOWSHIP
PROGRAM. PURSUANT TO THIS PROGRAM, 30 FELLOWS ARE AT WORK IN THE U.S.,
CANADA AND THE UK RAISING AWARENESS OF THE NEED TO ELIMINATE DEATHS DUE
TO MALARIA. IFYC BUILDS MUTUAL RESPECT AND PLURALISM AMONG YOUNG
PEOPLE FROM DIFFERENT RELIGIOUS TRADITIONS BY EMPOWERING THEM TO WORK
TOGETHER TO SERVE OTHERS. THEY BUILD RELATIONSHIPS ON THE VALUES THAT
ARE SHARED SUCH AS HOSPITALITY AND CARING FOR THE EARTH, AND HOW THESE
VALUES CAN BE LIVED OUT TOGETHER TO CONTRIBUTE TO THE BETTERMENT OF THE
COMMUNITY.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OUTREACH EDUCATION AND TRAINING (OET): THE OET DEPARTMENT IS CHARGED
WITH PROVIDING TRAINING ON RELIGIOUS PLURALISM TO YOUNG PEOPLE AND
THEIR ALLIES. OET STAFF MEMBERS DELIVER TRAINING SESSIONS AT COLLEGES

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211 12-18-08

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

INTERFAITH YOUTH CORE

Employer identification number 30-0212534

AND UNIVERSITIES ACROSS THE COUNTRY WITH THE GOAL OF BUILDING A SOCIAL
NORM OF RELIGIOUS PLURALISM ON THESE CAMPUSES.
EXPENSES \$ 283534. INCLUDING GRANTS OF \$ 0. REVENUE \$ 225333.
SEARCH INSTITUTE (CHICAGO) - THE ORGANIZATION IS DEVELOPING THE
CAPACITY OF LOCAL INTERFAITH INITIATIVES IN CHICAGO.
EXPENSES \$ 22753. INCLUDING GRANTS OF \$ 0. REVENUE \$ 31473.
SEARCH INSTITUTE (NATIONAL) - IFYC HAS A CONTRACT WITH THE SEARCH
INSTITUTE TO WORK WITH SEARCH TO ENGAGE, TRAIN AND COMMUNICATE WTH FOUR
INTERFAITH ORGANIZATIONS IN CHICAGO AND IN NEW ORLEANS, PHILADELPHIA
AND MINNEAPOLIS AND PROVIDE THESE ORGANIZATIONS WITH TECHNICAL
ASSISTANCE AS THEY IMPLEMENT THEIR WORK PLANS.
EXPENSES \$ 80240. INCLUDING GRANTS OF \$ 0. REVENUE \$ 84907.
FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD MEMBERS ELECT NEW MEMBERS
TO THE BOARD.
FORM 990, PART VI, SECTION A, LINE 10: THE 990 WILL BE DISTRIBUTED TO ALL
OF THE BOARD MEMBERS. THE FINANCE AUDIT COMPENSATION AND EVALUATION (FACE)
COMMITTEE WILL REVIEW THE TAX RETURN AND AUTHORIZED INDIVIDUALS WILL SIGN
IT.
FORM 990, PART VI, SECTION B, LINE 12C: DIRECTORS ARE REQUIRED TO COMPLETE
A CONFLICT OF INTEREST STATEMENT. THE COO REVIEWS DIRECTOR'S CONFLICT OF

INTEREST STATEMENTS AND REVIEWS PERSONNEL POLICY HANDWOOK WITH EMPLOYEES.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211 12-18-08

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Employer identification number Name of the organization INTERFAITH YOUTH CORE 30-0212534 FORM 990, PART VI, SECTION B, LINE 15: EACH FISCAL YEAR THE BOARD REVIEWS THE COMPENSATION OF THE EXECUTIVE DIRECTOR. COMPENSATION IS SET AFTER REVIEW OF COMPARABLE DATA AT OTHER ORGANIZATIONS AND AN ASSESSMENT OF THE EXECUTIVE DIRECTOR'S PERFORMANCE. THE FINANCE, AUDIT, COMPENSATION AND EVALUATION (FACE) COMMITTEE CONDUCTS THIS ANALYSIS. THE BOARD APPROVES THE BUDGET, WHICH INCLUDES COMPENSATION LEVELS FOR STAFF. FORM 990, PART VI, SECTION C, LINE 19: SOME DOCUMENTS SUCH AS THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC ON IFYC'S WEBSITE. ALL OTHERS ARE AVAILABLE UPON REQUEST.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 12-18-08

Schedule O (Form 990) 2008

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