




See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009				
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH		D Employer identification number 54-1848713
		Doing Business As		E Telephone number (202) 657-0616
		Number and street (or P O box if mail is not delivered to street address) 1110 VERMONT AVENUE NW No 900	Room/suite	G Gross receipts \$ 13,397,891
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		
		F Name and address of principal officer DONNA M ANDERSON 1110 VERMONT AVE NW 900 WASH, DC 20005		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ WWW.AMERICASPROMISE.ORG		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation 1997	M State of legal domicile MD

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THROUGH THE COLLECTIVE STRENGTH AND COMBINED RESOURCES OF 375 PARTNER ORGANIZATIONS AND THEIR LOCAL AFFILIATES, THE AMERICA'S PROMISE ALLIANCE WORKS TOGETHER TO BUILD A STRONGER FOUNDATION FOR AMERICA'S FUTURE ECONOMIC COMPETITIVENESS AND PROSPERITY ALLIANCE INITIATIVES HELP EQUIP OUR YOUNG PEOPLE TO GRADUATE HIGH SCHOOL READY FOR COLLEGE, WORK AND LIFE			
	2 Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	3 <u>3</u>	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 <u>3</u>	
	5	Total number of employees (Part V, line 2a)	5 <u>6</u>	
6	Total number of volunteers (estimate if necessary)	6 <u></u>		
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a <u></u>		
b	Net unrelated business taxable income from Form 990-T, line 34	7b <u></u>		
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 23,296,734	Current Year 11,625,399
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-84,674	-345,199
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-31,382	-43,086
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,180,678	11,237,114
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,360,770
14		Benefits paid to or for members (Part IX, column (A), line 4)		0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,312,743	5,249,678
16a		Professional fundraising fees (Part IX, column (A), line 11e)	430,032	585,000
b		Total fundraising expenses (Part IX, column (D), line 25) <u>597,002</u>		
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	7,969,626	8,533,252
18		Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	16,073,171	16,924,390
19		Revenue less expenses Subtract line 18 from line 12	7,107,507	-5,687,276
Net Assets or Fund Balances				Beginning of Current Year
	20	Total assets (Part X, line 16)	33,521,124	28,848,357
	21	Total liabilities (Part X, line 26)	2,226,053	2,352,905
	22	Net assets or fund balances Subtract line 21 from line 20	31,295,071	26,495,452

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge				
	***** Signature of officer		2010-05-12 Date		
	DONNA M ANDERSON CFO Type or print name and title				
Paid Preparer's Use Only	Preparer's signature	JENNY E HERRERA CPA	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	RUBINO & MCGEEHIN CHARTERED 6903 ROCKLEDGE DRIVE SUITE 1200 BETHESDA, MD 20817			EIN <input type="checkbox"/>
					Phone no <input type="checkbox"/> (301) 564-3636

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

BUILDING ON THE LEGACY OF FOUNDING CHAIRMAN, GENERAL COLIN POWELL, WE ARE A STRONG AND EFFECTIVE PARTNERSHIP ALLIANCE COMMITTED TO ENSURING CHILDREN EXPERIENCE THE FUNDAMENTAL RESOURCES THEY NEED TO SUCCEED

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

✓

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

✓

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 3,084,201 including grants of \$ 913,960) (Revenue \$)

FIRST FOCUS BIPARTISAN ADVOCACY PROGRAM THAT IS COMMITTED TO MAKING CHILDREN AND FAMILIES A PRIORITY IN FEDERAL POLICY AND BUDGET DECISIONS FIRST FOCUS BRINGS BOTH TRADITIONAL AND NON-TRADITIONAL LEADERS TOGETHER TO ADVOCATE FOR FEDERAL POLICIES THAT WILL IMPROVE THE LIVES OF AMERICA'S CHILDREN CHILD HEALTH, EDUCATION, FAMILY ECONOMICS, CHILD WELFARE, AND CHILD SAFETY ARE THE CORE ISSUE AREAS IN WHICH FIRST FOCUS PROMOTES BIPARTISAN POLICY SOLUTIONS

4b

(Code) (Expenses \$ 2,884,601 including grants of \$) (Revenue \$)

ALLIANCE BUILDING CHARGED WITH DEVELOPING AND MAINTAINING A COMPREHENSIVE PARTNER ENGAGEMENT STRATEGY TO BUILD THE STRONGEST POSSIBLE MULTI-SECTOR ALLIANCE THROUGH STRATEGIES AND INITIATIVES, THIS DEPARTMENT WORKS WITH OUR NATIONAL PARTNERS TO MOBILIZE THEIR RESOURCES TO ACHIEVE BETTER OUTCOMES FOR YOUNG PEOPLE

4c

(Code) (Expenses \$ 2,081,945 including grants of \$ 890,000) (Revenue \$)

DROPOUT PREVENTION CAMPAIGN DESIGNED TO RAISE PUBLIC AWARENESS ABOUT THE COUNTRY'S HIGH SCHOOL DROPOUT CRISIS AND MOBILIZE THE NATION TO DEVELOP SOLUTIONS TO MAKE THIS HAPPEN, THE ALLIANCE WILL HAVE HELD DROPOUT PREVENTION SUMMITS IN EVERY STATE AND MORE THAN 50 COMMUNITIES BY JUNE 2010 THE GOAL OF THESE SUMMITS IS TO INCREASE AWARENESS, ENCOURAGE COLLABORATION AND FACILITATE ACTION IN STATES AND COMMUNITIES TO IMPROVE THEIR GRADUATION RATES GOVERNORS, MAYORS, SCHOOL SUPERINTENDENTS AND MORE THAN 300 ALLIANCE PARTNERS ARE PLAYING A PIVOTAL ROLE IN CONVENING THESE SUMMITS

(Code) (Expenses \$ 1,816,518 including grants of \$) (Revenue \$)

AWARENESS/COMMUNICATIONS

(Code) (Expenses \$ 1,271,480 including grants of \$ 752,500) (Revenue \$)

FEATURED COMMUNITIES/PROMISE ZONES

(Code) (Expenses \$ 554,186 including grants of \$) (Revenue \$)

FINANCIAL LITERACY

(Code) (Expenses \$ 464,471 including grants of \$) (Revenue \$)

RELATIONSHIP DEVELOPMENT

(Code) (Expenses \$ 365,816 including grants of \$) (Revenue \$)

RESEARCH

(Code) (Expenses \$ 54,325 including grants of \$) (Revenue \$)

SERVICE LEARNING

(Code) (Expenses \$ 36,665 including grants of \$) (Revenue \$)

100 BEST COMMUNITIES

4d

Other program services (Describe in Schedule O)

(Expenses \$ 4,563,461 including grants of \$ 752,500) (Revenue \$)















4e

Total program service expenses

\$ 12,614,208

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)? <i>If "Yes," complete Schedule A</i> 	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes	
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 "Yes," complete Schedule C, Part I</i> 	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> 	4	Yes	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8		No
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? <i>If "Yes," complete Schedule D, Part IV</i> 	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10		No
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i> 	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>			
	• 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>			
	• 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>			
	• 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? <i>If "Yes," complete Schedule D, Part IX.</i>			
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? 	Yes	No	
	<i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	12A		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b		No
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 located outside the U S ? <i>If "Yes," complete Schedule F, Part II</i>	15		No
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 U S ? <i>If "Yes," complete Schedule F, Part III</i>	16		No
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> 	17	Yes	
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 "Yes," complete Schedule G, Part II</i> 	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 	19		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20		No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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 "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
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		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	37		
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	64		
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)				2b
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			3a	No
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)?			4a	No
	b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No	
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			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?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No	
d If "Yes," indicate the number of Forms 8282 filed during the year			7d		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9 Sponsoring organizations maintaining donor advised funds.					
a Did the organization make any taxable distributions under section 4966?			9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10 Section 501(c)(7) organizations. Enter					
a Initiation fees and capital contributions included on Part VIII, line 12			10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b		
11 Section 501(c)(12) organizations. Enter					
a Gross income from members or shareholders			11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b		

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	34	
b	Enter the number of voting members that are independent	1b	33	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation 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		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AL , AK , AZ , CA , AR , CO , CT , DC , FL , GA , IL , KS , KY , LA , ME , MD , MA , MI , MN , MO , MS , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	DONNA M ANDERSON 1110 VERMONT AVE NW 900 WASHINGTON, DC 20005 (202) 657-0616

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 Report compensation for the calendar year ending with or within the organization’s tax year Use Schedule J-2 if additional space is needed

- 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 all of the organization’s **current** key employees See instructions for definition of "key employee "
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARGUERITE KONDRACKE PRESIDENT & CEO	40 00	X		X				331,264	0	16,492
ALMA J POWELL CHAIRMAN	10 00	X		X				0	0	0
RET GEN COLIN L POWELL FOUNDING CHAIRMAN	1 00	X						0	0	0
C GREGG PETERSMEYER VICE CHAIR	1 00	X		X				0	0	0
HARRIS WOFFORD BOARD MEMBER	1 00	X						0	0	0
JAMES L BARKSDALE BOARD MEMBER	1 00	X						0	0	0
PETER L BENSON PHD BOARD MEMBER	1 00	X						0	0	0
GEOFFREY T BOISI BOARD MEMBER	1 00	X						0	0	0
KATHERINE BRADLEY BOARD MEMBER	1 00	X						0	0	0
STALEY G CATES CFA BOARD MEMBER	1 00	X						0	0	0
JIN ROY RYU BOARD MEMBER	1 00	X						0	0	0
JUDY WOODRUFF BOARD MEMBER	1 00	X						0	0	0
ANGELA DIAZ BOARD MEMBER	1 00	X						0	0	0
BRIAN GALLAGHER BOARD MEMBER	1 00	X						0	0	0
JOEL KLEIN BOARD MEMBER	1 00	X						0	0	0
KATHLEEN A MURPHY SECRETARY TREASURER	1 00	X		X				0	0	0
STEPHANIE BELL-ROSE BOARD MEMBER	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NEIL BUSH BOARD MEMBER	1 00	X						0	0	0
DANIEL A CASEY BOARD MEMBER	1 00	X						0	0	0
REV DR W WILSON GOODE SR BOARD MEMBER	1 00	X						0	0	0
LATASHA KINNARD BOARD MEMBER	1 00	X						0	0	0
LARRY A KLANE BOARD MEMBER	2 00	X						0	0	0
EDWARD B RUST BOARD MEMBER	1 00	X						0	0	0
ELAINE WYNN BOARD MEMBER	1 00	X						0	0	0
JOHN E MAUPIN JR BOARD MEMBER	1 00	X						0	0	0
DEBORAH QUAZZO BOARD MEMBER	1 00	X						0	0	0
RICK STEPHENS BOARD MEMBER	1 00	X						0	0	0
ALYSSA BISANZ BOARD MEMBER	1 00	X						0	0	0
RAYMOND G CHAMBERS BOARD MEMBER	1 00	X						0	0	0
BRIAN COMER BOARD MEMBER	1 00	X						0	0	0
RAUL FERNANDEZ BOARD MEMBER	1 00	X						0	0	0
HAROLD FORD BOARD MEMBER	1 00	X						0	0	0
CHARLENE LAKE BOARD MEMBER	1 00	X						0	0	0
MICHAEL K POWELL BOARD MEMBER	1 00	X						0	0	0
MARGARET SPELLINGS BOARD MEMBER	1 00	X						0	0	0
DONNA ANDERSON CFO & SVP FIN & ADMIN	40 00			X				179,039	0	13,387
BRUCE LESLEY PRESIDENT, FIRST FOCUS	40 00			X				201,489	0	19,419
KATHY SPANGLER CHIEF OPERATING OFFICER	40 00				X			194,656	0	9,488
DAVID PARK SENIOR VP - COMM	40 00				X			157,161	0	11,752
CHARLES HITESHEW EXECUTIVE VICE PRESIDENT	40 00					X		195,822	0	19,305
CARMITA VAUGHAN CHIEF STRATEGY OFFICER	40 00					X		144,786	0	6,496
MATT ALSHAB CHIEF INFORM OFFICER	40 00					X		139,104	0	17,288
MELINDA HUDSON EXECUTIVE VICE PRESIDENT	40 00					X		138,980	0	20,483
RALPH FORSHT SR VP - FIRST FOCUS	40 00					X		143,322	0	17,430
1b Total								1,825,623	0	151,540

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization▶17

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

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization	
(A) Name and business address	(B) Description of services	(C) Compensation
DUKE UNIVERSITY 2024 W MAIN ST DURHAM, NC 27708	EVALUATION SERVICES	600,000
THE WARFIELD GROUP 1615 H STREET NW WASHINGTON, DC 20062	PROFESSIONAL FUNDRAISING SERVICES	585,000
HOME FRONT COMMUNICATIONS 1121 14TH ST NW WASHINGTON, DC 20005	STRATEGIC COMMUNICATIONS	294,387
COLE DESIGN INC 1408 17TH AVE SOUTH NASHVILLE, TN 37212	GRAPHIC DESIGN SERVICES	254,163
TATE & TRYON 805 15TH ST NW 9TH FL WASHINGTON, DC 20005	ACCOUNTING SERVICES	221,380
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶15	

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	11,048				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	2,068,616				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	9,545,735				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f		11,625,399				
Program Service Revenue	2a		Business Code					
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f						
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		150,635			150,635
4		Income from investment of tax-exempt bond proceeds . . .						
5		Royalties		26,735			26,735	
6a		Gross Rents	(i) Real	(ii) Personal				
		b	Less rental expenses					
		c	Rental income or (loss)					
		d	Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)		-495,834			-495,834
8a		Gross income from fundraising events (not including \$ 46,452 of contributions reported on line 1c) See Part IV, line 18						
		a	11,048					
		b	Less direct expenses	b	116,273			
c		Net income or (loss) from fundraising events . . .		-69,821			-69,821	
9a		Gross income from gaming activities See Part IV, line 19						
		a						
		b	Less direct expenses	b				
c		Net income or (loss) from gaming activities . . .						
10a		Gross sales of inventory, less returns and allowances						
	a							
	b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory . . .							
	Miscellaneous Revenue		Business Code					
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions			11,237,114	0	0	-388,285	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	2,556,460	2,556,460		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,134,147	491,893	642,254	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,372,308	2,496,200	876,108	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	103,188	69,094	34,094	
9	Other employee benefits	355,345	223,872	131,473	
10	Payroll taxes	284,690	189,183	95,507	
11	Fees for services (non-employees)				
a	Management				
b	Legal	163,201		163,201	
c	Accounting	319,036		319,036	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	585,000			585,000
f	Investment management fees				
g	Other	1,353,951	1,339,269	14,682	
12	Advertising and promotion	76,069	73,483	2,586	
13	Office expenses	664,269	344,954	319,315	
14	Information technology	426,243	368,928	57,315	
15	Royalties				
16	Occupancy	691,916		691,916	
17	Travel	242,575	166,828	75,747	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,418,000	1,322,679	83,319	12,002
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	246,913		246,913	
23	Insurance	42,211		42,211	
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)				
a	BAD DEBT EXPENSE	2,100,000		2,100,000	
b	MISCELLANEOUS	788,868	771,469	17,399	
c	G&A ALLOCATION	0	2,199,896	-2,199,896	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	16,924,390	12,614,208	3,713,180	597,002
26	Joint costs. Check here <input type="checkbox"/> 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				

Part X

Balance Sheet

					(A)		(B)	
					Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing				1,000	1	1,000
	2	Savings and temporary cash investments				7,674,439	2	4,764,424
	3	Pledges and grants receivable, net				21,072,974	3	18,592,624
	4	Accounts receivable, net				7,588	4	693
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L					5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L					6	
	7	Notes and loans receivable, net					7	
	8	Inventories for sale or use					8	
	9	Prepaid expenses and deferred charges				111,773	9	89,631
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,914,377				
	b	Less accumulated depreciation	10b	497,795	1,602,961	10c	1,416,582	
	11	Investments—publicly traded securities			2,999,132	11	3,933,835	
	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			51,257	15	49,568	
16	Total assets. Add lines 1 through 15 (must equal line 34)			33,521,124	16	28,848,357		
Liabilities	17	Accounts payable and accrued expenses			468,161	17	510,354	
	18	Grants payable			130,000	18	397,404	
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21		
	22	Payables to current and former officers, directors, trustees, key employees, 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 to unrelated third parties			445,143	24	353,984	
	25	Other liabilities Complete Part X of Schedule D			1,182,749	25	1,091,163	
	26	Total liabilities. Add lines 17 through 25			2,226,053	26	2,352,905	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets			7,640,645	27	5,818,961	
	28	Temporarily restricted net assets			23,654,426	28	20,676,491	
	29	Permanently restricted net assets				29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds				30		
	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other funds				32		
	33	Total net assets or fund balances			31,295,071	33	26,495,452	
	34	Total liabilities and net assets/fund balances			33,521,124	34	28,848,357	

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH	Employer identification number 54-1848713
---	--

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

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

☐

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

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	26,316,286	9,375,844	24,465,355	23,350,734	11,671,851	95,180,070
2 Tax revenues levied for the organization'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 through 3	26,316,286	9,375,844	24,465,355	23,350,734	11,671,851	95,180,070
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)						20,572,236
6 Public Support. Subtract line 5 from line 4						74,607,834

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	26,316,286	191,377	24,465,355	23,350,734	11,671,851	95,180,070
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	57,212	191,377	245,503	176,711	177,370	848,173
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	6,885					6,885
11 Total support (Add lines 7 through 10)						96,035,128

12

Gross receipts from related activities, etc (See instructions)

12

13

First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	77 690 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	83 500 %

- 16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2009. 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 IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2008. 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 IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts 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						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH	Employer identification number 54-1848713
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1

Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2

Political expenditures ▶ \$
- 3

Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Yes

No
- 4a

Was a correction made?

Yes

No
- b

If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4

Did the filing organization file **Form 1120-POL** for this year?

Yes

No
- 5

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		135,986													
c Total lobbying expenditures (add lines 1a and 1b)		135,986													
d Other exempt purpose expenditures		16,904,677													
e Total exempt purpose expenditures (add lines 1c and 1d)		17,040,663													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	850,982	894,668	959,037	1,000,000	3,704,687
b Lobbying ceiling amount (150% of line 2a, column(e))					5,557,031
c Total lobbying expenditures	827	132,062	275,959	135,986	544,834
d Grassroots non-taxable amount	212,746	223,667	239,759	250,000	926,172
e Grassroots ceiling amount (150% of line 2d, column (e))					1,389,258
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	a Volunteers?			
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
	c Media advertisements?			
	d Mailings to members, legislators, or the public?			
	e Publications, or published or broadcast statements?			
	f Grants to other organizations for lobbying purposes?			
	g Direct contact with legislators, their staffs, government officials, or a legislative body?			
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
	i Other activities? If "Yes," describe in Part IV			
	j Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

Employer identification number
54-1848713

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

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

(i) unrelated organizations

(ii) related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,136,575	215,773	920,802
d Equipment		760,770	276,021	484,749
e Other		17,032	6,001	11,031
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				1,416,582

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,237,114
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	16,924,390
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-5,687,276
4	Net unrealized gains (losses) on investments	4	867,249
5	Donated services and use of facilities	5	20,408
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	887,657
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-4,799,619

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	12,241,044
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	867,249
b	Donated services and use of facilities	2b	20,408
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	887,657
3	Subtract line 2e from line 1	3	11,353,387
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-116,273
c	Add lines 4a and 4b	4c	-116,273
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	11,237,114

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	17,040,663
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	116,273
e	Add lines 2a through 2d	2e	116,273
3	Subtract line 2e from line 1	3	16,924,390
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	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	16,924,390

Part XIV

Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Part XII, Line 4b - Other Adjustments		GOLF TOURNAMENT, DIRECT EXPENSES (SEE SCHEDULE G, PART II)
Part XIII, Line 2d - Other Adjustments		GOLF TOURNAMENT, DIRECT EXPENSES (SEE SCHEDULE G, PART II)

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

Employer identification number
54-1848713

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☐ Mail solicitations

b ☐ Internet and e-mail solicitations

c ☐ Phone solicitations

d ☒ In-person solicitations

e ☒ Solicitation of non-government grants

f ☒ Solicitation of government grants

g ☒ Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☒ Yes ☐ No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
THE WARFIELD GROUP	PROFESSIONAL FUNDRAISING SERVICES		No	8,284,469	585,000	7,699,469
Total ▶				8,284,469	585,000	7,699,469

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

MO,AL,CA,AR,KY,MA,NH,NY,NC,OH,OR,PA,SC,VA,WA,CO,CT,LA,FL,IL,KS,MD,MI,NJ,NM,TN,MN,WI,DC,ND,AK,RI,ME,AZ,UT,GA,MS,WV,OK

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		GOLF TOURNAMENT (event type)	(event type)	(total number)	(Add col (a) through col (c))
	1	Gross receipts	57,500		57,500
	2	Less Charitable contributions	11,048		11,048
	3	Gross income (line 1 minus line 2)	46,452		46,452
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	116,273		116,273
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3, column d, and line 10. ▶			

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Direct Expenses	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1, column d, and line 7 ▶			

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____ _____		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► _____			
Address ► _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ► _____			
Address ► _____			
16	Gaming manager information		
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
54-1848713

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any 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 ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

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

(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

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

[illegible]

Software ID:

Software Version:

EIN: 54-1848713

Name: AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
VOICES FOR NATIONAL SERVICECITY YEAR INC 1875 CONNECTICUT AVE NW STE 1130 WASHINGTON,DC 20009	22-2882549	501(C)(3)	10,000				NATIONAL SERVICE GRANT
CHILDREN'S DEFENSE FUND 4500 BISSONNET SUITE 260 BELLAIRE,TX 77401	52-0895622	501(C)(3)	25,000				ALL KIDS COVERED (HEALTH INSURANCE)
IL MATERNAL & CHILD HEALTH COALITION12565 W CHICAGO AVENUE CHICAGO,IL 60622	36-3651051	501(C)(3)	25,000				ALL KIDS COVERED (HEALTH INSURANCE)
THE CHILDREN'S AID SOCIETY150 EAST 45TH STREET NEW YORK,NY 10017	13-5562191	501(C)(3)	25,000				ALL KIDS COVERED (HEALTH INSURANCE)
YMCA OF GREATER LOUISVILLE545 S 2ND ST LOUISVILLE,KY 40202	61-0444843	501(C)(3)	25,000				ALL KIDS COVERED (HEALTH INSURANCE)
CHILDREN OF THE SUN ATHLETICEDUCATION FOUNDATIONP O BOX 41167 NORFOLK,VA 23541	54-1684985	501(C)(3)	10,000				DROPOUT SUMMIT
HARRIS COUNTY DEPARTMENT OF EDUCATION6300 IRVINGTON BLVD HOUSTON,TX 77022	74-6001215		10,000				DROPOUT SUMMIT
UNITED WAY OF EL PASO COUNTY1918 TEXAS AVE EL PASO,TX 79901	74-1291051	501(C)(3)	10,000				DROPOUT SUMMIT
UNITED WAY OF GREATER RICHMOND & PETERSBURG 2001 MAYWILL STREET 201 RICHMOND,VA 23230	23-7375346	501(C)(3)	10,000				DROPOUT SUMMIT
UNITED WAY OF PIERCE COUNTY1501 PACIFIC AVENUE 400 TACOMA,WA 98402	91-0650669	501(C)(3)	10,000				DROPOUT SUMMIT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
DEPARTMENT OF EDUCATION - AR4 CAPITOL MALL LITTLE ROCK,AR 72201	71-0847443		25,000				DROPOUT SUMMIT
INDIANA DEPARTMENT OF EDUCATIONINDIANA DEPARTMENT OF EDUCATION INDIANAPOLIS,IN 46204	35-6000158		25,000				DROPOUT SUMMIT
NEBRASKA CHILDREN AND FAMILIES FOUNDATION 215 CENTENNIAL MALL SOUTH 200 LINCOLN,NE 68508	91-1829974	501(C)(3)	25,000				DROPOUT SUMMIT
NEW MEXICO COMMUNITY FOUNDATION303 ROMA AVENUE NW 400 ALBUQUERQUE,NM 87102	85-0311210	501(C)(3)	25,000				DROPOUT SUMMIT
OREGON DEPARTMENT OF EDUCATION255 CAPITOL ST NE SALEM,OR 97310	93-6001954		25,000				DROPOUT SUMMIT
STATE OF COLORADO136 STATE CAPITOL DENVER,CO 80203	84-0644739		25,000				DROPOUT SUMMIT
ALIGNMENT NASHVILLE1 PUBLIC SQUARE NASHVILLE,TN 37201	45-0549393	501(C)(3)	10,000				DROPOUT SUMMIT
ARIZONA CENTER FOR AFTERSCHOOL EXCELLENCE700 W CAMPBELL PHOENIX,AZ 85013	86-1009220	501(C)(3)	10,000				DROPOUT SUMMIT
CHILDREN FIRST FUND125 S CLARK STREET CHICAGO,IL 60603	36-4094830	501(C)(3)	10,000				DROPOUT SUMMIT
CHILDREN'S BOARD OF HILLSBOROUGH CITY1002 E PALM AVE TAMPA,FL 33605	59-2954998		10,000				DROPOUT SUMMIT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CINCINNATI STATE TECHNICAL AND COMMUNITY COLLEGE 3520 CENTRAL PARKWAY CINCINNATI, OH 45223	31-0784054		10,000				DROPOUT SUMMIT
CITY OF AUSTIN HEALTH AND HUMAN SERVICES DEPARTME 15 WALLER ST AUSTIN, TX 78702	74-6000085		10,000				DROPOUT SUMMIT
CITY OF DENVER 201 W COLFAX AVE DEPT 1101 DENVER, CO 80202	84-6000580		10,000				DROPOUT SUMMIT
CITY YEAR OF CLEVELAND 1132 EUCLID AVENUE CLEVELAND, OH 44115	22-2882549	501(C)(3)	10,000				DROPOUT SUMMIT
COMMUNITIES IN SCHOOLS OF THE NATION'S CAPITAL 3121 S ST NW WASHINGTON, DC 20007	72-1581607	501(C)(3)	10,000				DROPOUT SUMMIT
COUNCIL OF NEW JERSEY GRANTMAKERS 101 WEST STATE STREET TRENTON, NJ 08608	22-3470235	501(C)(3)	10,000				DROPOUT SUMMIT
GOOD SHEPHERD SERVICES 305 SEVENTH AVE NEW YORK, NY 10001	13-5598710	501(C)(3)	10,000				DROPOUT SUMMIT
MARION COUNTY COMMISSION ON YOUTH 3901 N MERIDIAN STREET INDIANAPOLIS, IN 42608	35-1900516	501(C)(3)	10,000				DROPOUT SUMMIT
MILWAUKEE TEACHERS' EDUCATION ASSOCIATION 5130 W VLIET ST MILWAUKEE, WI 53208	39-0478280	501(C)(6)	10,000				DROPOUT SUMMIT
OFFICE OF MAYOR MIAMI FL 3500 PAN AMERICAN DRIVE MIAMI, FL 33133	59-6000375		10,000				DROPOUT SUMMIT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
RICHMOND COUNTY BOARD OF EDUCATION864 BROAD STREET AUGUSTA,GA 30901	58-0003100		10,000				DROPOUT SUMMIT
SUMMIT COUNTY EDUCATIONAL SERVICE CENTER420 WASHINGTON AVENUE CUYAHOGA FALLS,OH 44221	34-1421081		10,000				DROPOUT SUMMIT
THE PINELLAS EDUCATION FOUNDATION12090 STARKEY ROAD LARGO,FL 33773	59-2688253	501(C)(3)	10,000				DROPOUT SUMMIT
UNITED WAY OF FRESNO COUNTY4949 E KINGS CANYON ROAD FRESNO,CA 93727	94-1156514	501(C)(3)	10,000				DROPOUT SUMMIT
UNITED WAY OF GREATER TOLEDOONE STRANAHAN SQ TOLEDO,OH 43604	34-4427947	501(C)(3)	10,000				DROPOUT SUMMIT
UNITED WAY OF METROPOLITAN DALLAS 1800 N LAMAR STREET DALLAS,TX 75202	75-6005352	501(C)(3)	10,000				DROPOUT SUMMIT
COMMUNITIES IN SCHOOLS GEORGIA600 WEST PEACHTREE STREET ATLANTA,GA 30308	58-1912923	501(C)(3)	15,000				DROPOUT SUMMIT
UNITED WAY OF SOUTHEAST FLORIDA1301 RIVER PLACE BLVD 400 JOVIALLY,FL 32207	59-0637825	501(C)(3)	15,000				DROPOUT SUMMIT
ILLINOIS STATE UNIVERSITY706 E LINCOLN NORMAL,IL 61762	37-6014070		25,000				DROPOUT SUMMIT
MARYLAND STATE DEPT OF EDUCATION200 WEST BALTIMORE STREET BALTIMORE,MD 21201	52-2600203		25,000				DROPOUT SUMMIT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
MAUI ECONOMIC DEVELOPMENT BOARD INC 1305 NORTH HOLOPONO STREET 1 KIHEI, HI 96753	99-0226377	501(C)(3)	25,000				DROPOUT SUMMIT
NORTH DAKOTA EDUCATION ASSOCIATION FOUNDATION66 EVERGREEN CIRCLE WEST FARGO, ND 58078	36-3779023	501(C)(3)	25,000				DROPOUT SUMMIT
UNITED WAY OF YELLOWSTONE CO (ROOTS OF PROMISE) 2920 2ND AVENUE NORTH BILLINGS, MT 59101	94-3233542	501(C)(3)	25,000				DROPOUT SUMMIT
STATE OF TENNESSEE 312 ROSA L PARKS AVENUE 20TH FLOOR NASHVILLE, TN 37243	62-6001445		25,000				DROPOUT SUMMIT
VAMLEPO BOX 400 MARLBORO, VT 05344	11-7338038		25,000				DROPOUT SUMMIT
VOLUNTEERS OF AMERICA DAKOTAS1309 W 52ST STREET SIOUX FALLS, SD 57109	23-7353508	501(C)(3)	25,000				DROPOUT SUMMIT
WESTED730 HARRISON STREET SAN FRANCISCO, CA 94107	94-3233542	115(A)(1)	25,000				DROPOUT SUMMIT
WEST VIRGINIA DEPARTMENT OF EDUCATION AND THE ART 190 KANAWHA BLVD EAST CHARLESTON, WV 25305	55-0691505		25,000				DROPOUT SUMMIT
WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION 125 S WEBSTER STREET MADISON, WI 53702	39-6006487		25,000				DROPOUT SUMMIT
WYOMING ASSOCIATION OF SECONDARY SCHOOL PRINCIPAL 3301 GRAYS GABLE LARAMIE, WY 82072	83-0265887		25,000				DROPOUT SUMMIT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
MINNESOTA ALLIANCE WITH YOUTH1313 5TH STREET SE 321 MINNEAPOLIS,MN 55414	41-6003776	501(C)(3)	35,000				DROPOUT SUMMIT
CHILDREN'S CAMPAIGN INCPO BOX 1718 TALLAHASSEE,FL 32302	31-1811747	501(C)(3)	40,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
CHILDREN'S DEFENSE FUND - OHIO395 E BROAD STREET 330 COLUMBUS,OH 43215	52-0895622	501(C)(3)	40,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
EMORY UNIVERSITY1599 CLIFTON ROAD NE 4TH FLOOR ATLANTA,GA 30322	58-0566256	501(C)(3)	40,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
SCHUYLER CENTER FOR ANALYSIS & ADVOCACY 150 STATE STREET ALBANY,NY 12207	13-5562357	501(C)(3)	40,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
MAINE CHILDREN'S ALLIANCE303 STATE STREET AUGUSTA,ME 04330	22-2546643	501(C)(3)	35,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
SARGENT SHRIVER NATIONAL CENTER ON POVERTY LAW50 E WASHINGTON ST 500 CHICAGO,IL 60602	36-3152790	501(C)(3)	35,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
MISSISSIPPI CENTER FOR JUSTICES5 OLD RIVER PLACE 203 JACKSON,MS 39202	13-4203234	501(C)(3)	15,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
VOICES FOR UTAH'S CHILDREN747 EAST SOUTH TEMPLE 100 SALT LAKE CITY,UT 84102	87-0428873	501(C)(3)	15,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
ARKANSAS ADVOCATES FOR CHILDREN & FAMILIES UNION STATION SUITE 301 LITTLE ROCK,AR 72201	71-0492205	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CENTER FOR PUBLIC POLICY PRIORITIES900 LYDIA STREET AUSTIN,TX 78702	74-2898197	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
CHILD AND FAMILY POLICY CENTER218 6TH AVENUE SUITE 1021 DES MOINES,IA 50309	42-1378567	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
CHILDREN FIRST FOR OREGONPO BOX 14914 PORTLAND,OR 97293	94-3168157	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
CHILDRENS ALLIANCE718 SIXTH AVENUE SOUTH SEATTLE,WA 98104	91-0982879	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
CONNECTICUT VOICES FOR CHILDREN33 WHITNEY AVENUE NEW HAVEN,CT 06510	06-1435280	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
KENTUCKY YOUTH ADVOCATES110001 BLUEGRASS PARKWAY 100 JEFFERSONTOWN,KY 40299	61-0929390	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
MARYLAND ADVOCATES FOR CHILDREN8 MARKET PLACE 5TH FL BALTIMORE,MD 21202	52-1555895	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
MICHIGAN'S CHILDREN428 W LENAWE LANSING,MI 48933	38-3078577	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
NEW ENGLAND ALLIANCE FOR CHILDREN'S HEALTH 30 WINTER ST FL 10 BOSTON,MA 02108	04-3355127	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
NEW MEXICO VOICES FOR CHILDREN2340 ALAMO SE SUITE 120 ALBUQUERQUE,NM 87106	85-0348301	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
THE CHILDREN'S PARTNERSHIP1351 3RD STREET PROMENADE 206 SANTA MONICA,CA 904011321	94-3213100	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
VOICES FOR VIRGINIA'S CHILDREN701 E FRANKLIN STREET 807 RICHMOND,VA 23210	54-1726265	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
VOICES OF OHIO'S CHILDREN1005 EATON AVENUE AKRON,OH 44303	34-1941907	501(C)(3)	20,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
CITIZENS' CMTE FOR CHILDREN OF NY105 EAST 22ND STREET NEW YORK,NY 10010	13-5618593	501(C)(3)	25,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
PENNSYLVANIA PARTNERSHIP FOR CHILDREN116 PINE STREET SUITE 430 HARRISBURG,PA 17101	23-2613869	501(C)(3)	25,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
SC APPLESEED JUSTICE LEGAL CENTERPO BOX 7187 COLUMBIA,SC 29202	57-1035023	501(C)(3)	35,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
THE ASSOCIATION FOR CHILDREN OF NEW JERSEY 35 HALSEY STREET NEWARK,NJ 07102	22-1695034	501(C)(3)	40,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
ACTION FOR CHILDREN NORTH CAROLINA1300 ST MARYS STREET 500 RALEIGH,NC 27605	58-1534066	501(C)(3)	75,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES
RHODE ISLAND KIDS COUNTONE UNION STATION PROVIDENCE,RI 02903	06-1485449	501(C)(3)	45,000				FIRST FOCUS STATE - ADVOCACY ON CHILDREN'S ISSUES & DROPOUT SUMMIT
PHILADELPHIA YOUTH NETWORK714 MARKET STREET 304 PHILADELPHIA,PA 19106	23-2993155	501(C)(3)	55,000				DROPOUT PREVENTION & DROPOUT SUMMIT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
COMMUNITIES IN SCHOOLS NC222 N PERSON ST RALEIGH, NC 27601	56-1677831	501(C)(3)	70,000				DROPOUT PREVENTION & DROPOUT SUMMIT
HARRIS COUNTY DEPARTMENT OF EDUCATION900 BAGBY 2ND FLOOR HOUSTON, TX 77002	74-6001215		50,000				PROMISE ZONES
OPERATION SHOESTRING 1711 BAILEY AVENUE JACKSON, MS 392831223	64-0471554	501(C)(3)	100,000				PROMISE ZONES
UNITED WAY FOR GREATER NEW ORLEANS2515 CANAL STREET NEW ORLEANS, LA 70119	72-0471369	501(C)(3)	150,000				PROMISE ZONES
COMMISSIONER EL FRANCO LEE1001 PRESTON 950 HOUSTON, TX 77002	76-0454514		172,500				PROMISE ZONES
JACKSON COUNTY CIVIC ACTION COMMITTEE5343 JEFFERSON STREET MOSS POINT, MS 395628723	64-0434184	501(C)(3)	240,000				PROMISE ZONES
UNITED WAY OF THE CAPITAL AREA843 N PRESIDENT STREET JACKSON, MS 39225	64-0303075	501(C)(3)	40,000				PROMISE ZONES & DROPOUT SUMMIT

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

Employer identification number

54-1848713

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div></div> <div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div></div> <div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div></div> <div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div></div> <div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div></div> <div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MARGUERITE KONDRACKE	(i) (ii)	331,264			8,250	8,242	347,756	
DONNA ANDERSON	(i) (ii)	167,138	11,901		5,232	8,155	192,426	
BRUCE LESLEY	(i) (ii)	188,014	13,475		6,179	13,240	220,908	
KATHY SPANGLER	(i) (ii)	184,656	10,000		5,858	3,630	204,144	
DAVID PARK	(i) (ii)	148,161	9,000		4,770	6,982	168,913	
CHARLES HITESHEW	(i) (ii)	195,822			6,065	13,240	215,127	
CARMITA VAUGHAN	(i) (ii)	144,786			4,388	2,108	151,282	
MATT ALSHAB	(i) (ii)	129,654	9,450		4,334	12,954	156,392	
MELINDA HUDSON	(i) (ii)	129,442	9,538		4,374	16,109	159,463	
RALPH FORSHT	(i) (ii)	138,322	5,000		4,416	13,014	160,752	

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
	Part I, Line 7	DURING 2009, A ONE-TIME PERFORMANCE BASED BONUS WAS ISSUED TO ALL EMPLOYEES, EXCEPT THE CEO, IN LIEU OF ANNUAL SALARY INCREASES. THESE BONUSES RANGED FROM 4% TO 7% OF ANNUAL SALARY BASED ON A PERFORMANCE RATING SCALE.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

Employer identification number
54-1848713

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		MICHAEL POWELL JOINED THE BOARD IN 2009 HE IS THE SON OF THE FOUNDING CHAIRMAN RET GENERAL COLIN L POWELL AND ALMA POWELL (CHAIR OF THE BOARD)
Form 990, Part VI, Section B, line 11		THE AMERICA'S PROMISE ALLIANCE BOARD OF DIRECTORS CHARGED THE AUDIT & FINANCE COMMITTEE WITH REVIEWING THE FORM 990 PRIOR TO FILING A COPY OF THE 990 WAS E-MAILED TO THE COMMITTEE AND A CONFERENCE CALL WAS HELD TO DISCUSS THE FORM PRIOR TO FILING THE RETURN ALL BOARD MEMBERS RECEIVE A PRINTED COPY OF THE FORM 990 WITH THEIR BOARD MEETING MATERIALS
Form 990, Part VI, Section B, line 12c		AMERICA'S PROMISE REVIEWS ALL CONTRACTS, AGREEMENTS AND EMPLOYEES FOR CONNECTIONS TO THE BOARD MEMBERS IF A CONFLICT WERE IDENTIFIED, IT WOULD BE REPORTED TO THE PRESIDENT, WHO WOULD IN TURN BRING THE CONFLICT TO THE BOARD
Form 990, Part VI, Section B, line 15		THE EXECUTIVE COMMITTEE OF THE AMERICA'S PROMISE BOARD IS COMPRISED OF THE CHAIR, THE VICE CHAIR (S), THE SECRETARY, THE TREASURER, AND THE CHAIRMEN OF THE FOLLOWING STANDING COMMITTEES AUDIT & FINANCE, STRATEGIC PLANNING AND RESOURCE DEVELOPMENT, GOVERNANCE AND NOMINATING, AND THE PRESIDENT AND CEO THE EXECUTIVE COMMITTEE APPROVES THE COMPENSATION FOR THE PRESIDENT AND CEO ON AN ANNUAL BASIS THE AUDIT & FINANCE COMMITTEE APPROVES THE USE OF AN ANNUAL SALARY COMPENSATION SURVEY BASED ON AT LEAST THREE INDEPENDENT SURVEYS THE ANNUAL SURVEY INCLUDES THE POSITION OF PRESIDENT AND CEO AND IS AVAILABLE TO MEMBERS OF THE EXECUTIVE COMMITTEE THE AUDIT COMMITTEE, SERVING AS THE COMPENSATION COMMITTEE, REVIEWS AND APPROVES THE COMPENSATION FOR THE CFO, CSO, CDO, AND PRESIDENT OF FIRST FOCUS AN ANNUAL REPORT BASED ON AT LEAST THREE INDEPENDENT SURVEYS IS PREPARED AND PRESENTED TO THE AUDIT & FINANCE COMMITTEE, SERVING AS THE COMPENSATION COMMITTEE FOR THE BOARD THE COMPENSATION COMMITTEE APPROVES THE USE OF THE SURVEY DATA THE DECISION IS DOCUMENTED IN THE MINUTES OF THE AUDIT & FINANCE/COMPENSATION COMMITTEE
Form 990, Part VI, Section C, line 19		GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST OF THE CFO
FORM 990, PART XI, LINE 2C		THE AUDIT COMMITTEE OVERSEES THE AUDIT AND SELECTION OF THE AUDIT FIRM THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR
FORM 990, PART VI, LINE 1		THE EXECUTIVE COMMITTEE IS COMPRISED OF THE CHAIR(S), THE PRESIDENT/CEO, THE VICE CHAIR(S), THE SECRETARY, THE TREASURER, AND THE CHAIRMEN OF THE FOLLOWING STANDING COMMITTEES AUDIT AND FINANCE, STRATEGIC PLANNING AND RESOURCE DEVELOPMENT, GOVERNANCE AND NOMINATING THE CHAIR OF THE TRUSTEE STEERING COMMITTEE SHALL BE AN EX OFFICIO MEMBER THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO TRANSACT SUCH BUSINESS AS NECESSARY FOR THE ADMINISTRATION AND OPERATION OF THE CORPORATION BETWEEN BOARD MEETINGS, AND HAS SUCH POWER, FROM TIME TO TIME, AS VESTED BY THE BOARD ACTIONS TAKEN BY THE EXECUTIVE COMMITTEE ARE REPORTED TO THE BOARD AT ITS NEXT MEETING BUT NEED NOT BE RATIFIED

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICA'S PROMISE- THE ALLIANCE FOR YOUTH

Employer identification number

54-1848713

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

(a)
Name, address, and EIN of disregarded entity

(b)
Primary activity

(c)
Legal domicile (state
or foreign country)

(d)
Total income

(e)
End-of-year assets

(f)
Direct controlling
entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b)
Primary activity

(c)
Legal domicile (state
or foreign country)

(d)
Exempt Code section

(e)
Public charity status
(if section 501(c)(3))

(f)
Direct controlling
entity

FIRST FOCUS CAMPAIGN FOR CHILDREN

1110 VERMONT AVE NW

WASHINGTON, DC 20005
26-3662498

SOCIAL WELFARE

DC

501(c)(4)

N/A

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
---	-------------------------	---	-------------------------------------	--	---------------------------------	--	--------------------------------

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

Yes

1n

Yes

1o

No

1p

Yes

1q

No

1r

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	FIRST FOCUS CAMPAIGN FOR CHILDREN	M	67,084
(2)	FIRST FOCUS CAMPAIGN FOR CHILDREN	N	404,290
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2009

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

[illegible]