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DLN: 93493319068831

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)

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

OMB No 1545-0047

2010

Open to Public Inspection

A Fo	r the .	2010 calendar year, or tax year beginning 01-	01-2010 and ending 12-31-2	010		
<b>3</b> Che	eck ıf a	pplicable C Name of organization YOUTHBUILD USA INC AND AFFILIATE			D Employer i	identification number
Add	Iress ch	Doing Business As			22-3076	454
Nar	me cha	nge			E Telephone	number
Inıt	ial retu	Number and street (of P O box it mail is no	ot delivered to street address)	Room/suite	(617) 623	3-9900
– Ter	mınate	d 58 DAY STREET			, ,	
- Am	ended				<b>G</b> Gross receip	ots \$ 26,947,639
- App	olication	SOMERVILLE, MA 02144 pending				
		F Name and address of principal	officer	H(a) Is this a	a group return for affil	lates? Yes No
		DOROTHY STONEMAN 58 DAY STREET				
		SOMERVILLE, MA 02144			affiliates included	
						t (see instructions) umber ► 3809
Ta	x-exem	pt status	o)		, p = 1.1 =	
W	ebsite	∷ ► WWW YOUTHBUILDUSA ORG				
<b>(</b> Forn	n of or	ganization 🔽 Corporation 🗀 Trust 🗀 Association 🗀 Ot	her 🕨	L Year of for	rmation 1990	M State of legal domicile MA
Pa	rt I	Summary			I	
	1	Briefly describe the organization's mission or n	nost significant activities			
o o	] :	YOUTHBUILD USA WORKS TO INCREASE T	HE NUMBERS OF YOUTH TRA	NSITIONING C	OUT OF POVE	RTY
ACTIVITIES & GOVERNANCE						
Ě						
5	2	Check this box 🛏 if the organization disconti	nued its operations or dispose	d of more than 2	5% of its net a	assets
5	3	Number of voting members of the governing bo	dy (Part VI, line 1a)		3	20
o V	4	Number of independent voting members of the	governing body (Part VI, line	1b)	. 4	20
ጀ	5	Total number of individuals employed in calend	ar year 2010 (Part V, line 2a	)	5	99
ŝ	6	Total number of volunteers (estimate if necess	ary)		6	0
₹	7a -	Total unrelated busıness revenue from Part VI	II, column (C), line 12		7a	0
	ь	Net unrelated business taxable income from Fo	orm 990-T, line 34		7b	0
				Prio	r Year	Current Year
_	8	Contributions and grants (Part VIII, line 1h)			18,968,367	25,967,085
ā	9	Program service revenue (Part VIII, line 2g)		310,139	205,546	
Revenue	10	Investment income (Part VIII, column (A), l	ines 3, 4, and 7d)		50,612	196,558
<b>—</b>	11	Other revenue (Part VIII, column (A), lines			-19,301	13,421
	12	Total revenue—add lines 8 through 11 (must 12)		line	19,309,817	26,382,610
	13	Grants and similar amounts paid (Part IX, co			6,955,227	11,395,387
	14	Benefits paid to or for members (Part IX, col	umn (A), line 4)		0	0
	15	Salaries, other compensation, employee ben	efits (Part IX, column (A), line	s 5-		
Expenses		10)			5,321,333	6,105,017
<u> </u>	16a	Professional fundraising fees (Part IX, colum			0	33,536
五	b	Total fundraising expenses (Part IX, column (D), line 2	,	_		
	17	Other expenses (Part IX, column (A), lines 1	•		5,445,513	6,517,061
	18	Total expenses Add lines 13-17 (must equ	, , , , , , , , , , , , , , , , , , , ,		17,722,073	24,051,001
. 07	19	Revenue less expenses Subtract line 18 fro	m line 12	<del></del>	1,587,744	2,331,609
පිරි කුළු					g of Current ear	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			15,712,262	19,447,643
2 B	21	Total liabilities (Part X, line 26)			3,644,998	4,499,871
20	22	Net assets or fund balances Subtract line 2			12,067,264	14,947,772
Par	t II	Signature Block			<u>'</u>	
Jnder mowl	r penal	ties of perjury, I declare that I have examined this and belief, it is true, correct, and complete. Declar				
		***** Signature of officer			)11-11-15 ate	
Sign Here		DOROTHY STONEMAN PRESIDENT YOUTHBUILD USA Type or print name and title	√CE0	Da		
		Print/Type Preparer'	s signature		Check if self-	PTIN
Paid	}	preparer's name SORIE M KABA CPA Firm's name ALEXANDER ARONSON FINNING & CO PC	SORIE M KABA CPA	2011-11-15	employed 🕨 🦵	
Prepa	arer					Firm's EIN
Jse (		Firm's address F 21 EAST MAIN STREET				Phone no ▶ (508) 366- 9100
		WESTBORO, MA 01581				1

May the IRS discuss this return with the preparer shown above? (see instructions)  $\ \ .$ 

FOLU	1990 (2010)					Page <b>Z</b>
Par	t III Statement of P Check if Schedule C	_	_	<b>lishments</b> lestion in this Part III		F
1	Briefly describe the organ	ızatıon's mıssıon				
YOU	THBUILD USA WORKS TO THBUILD PROGRAMS WHE RNING JOB SKILLS BY BUI	ERE UNEMPLOYE	D YOUNG AD	OULTS WORK TOWAR		SUPPORTING LOCAL CHOOL DIPLOMAS WHILE
2	Did the organization under the prior Form 990 or 990	-EZ?		rvices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these ne	ew services on Sc	hedule O			
3	Did the organization cease services?			t changes in how it co	nducts, any program	┌ Yes ┌ No
4	Describe the exempt purpo	ose achievements 1 (c)(4) organizatio	for each of th	on 4947(a)(1) trusts a	largest program services b re required to report the am service reported	•
4a	(Code	) (Expenses \$	8,766,368	ıncludıng grants of \$	) (Revenue \$	155,661 )
	FOR TRAINING, TECHNICAL AS DEVELOPMENT, NOW UNDER T APPROXIMATELY 1,000 STAFF I YOUTHBUILD GRANTEES, INCL	SISTANCE, AND QUAL HE U S DEPARTMENT MEMBERS FROM LOCA UDING NEW DOL YOU	ITY ASSURANĆE OF LABOR IN 2 AL YOUTHBUILD P THBUILD GRANTE	FOR YOUTHBUILD GRANTER 010, YOUTHBUILD USA MAN ROGRAMS AND PROVIDED ES, AND TELEPHONE CALLS		H SITE VISITS TO DOL SEVERAL WEBINARS FOR DOL
4b	(Code	) (Expenses \$	10,584,678	including grants of \$	) (Revenue \$	)
40	GRANTS TO SITES YOUTHBUIL ENHANCE PROGRAM CAPACITY INITIATIVES, SUCH AS THE CAI IN 2010, YOUTHBUILD USA MA IN BUILDING OR REHABBING I SERVICE WERE EARNED BY YO SCHEDULE 0) 1,000 STAFF ME	LD USA RAISES PUBLIC , PROVIDE OPERATIO REER DEVELOPMENT, DE \$11 4 MILLION IN ,300 UNITS OF AFFOR UTHBUILD AMERICOR MBERS, AS WELL AS F THBUILD USA ADDITI	C AND PRIVATE F NAL FUNDING, AI DIPLOMA-GRANT GRANTS TO 109 DABLE, INCREAS PS MEMBERS YO'ROVIDED TECHN ONALLY, YOUTHB	UNDS FOR LOCAL YOUTHBL ND SUPPORT THE DEVELOP ING SCHOOLS, GREEN, MEI AFFILIATED YOUTHBUILD PI INGLY GREEN HOUSING IN DUTHBUILD USA HELD 23 TF IICAL ASSISTANCE TO EACH UILD USA NATIONAL MENTO	JILD AFFILIATES WHICH ARE REGI	ADDITIONAL INNOVATIVE PROGRAM CATION, AND RURAL INITIATIVES 1,300 STUDENTS, WHO ASSISTED IMMATED 1 0 MILLION HOURS OF ORE THAN (CONTINUED ON GRAMS RECEIVING PASS-
4c	·	) (Expenses \$	893,951	including grants of \$	) (Revenue \$	)
	IN THE RECONSTRUCTION OF	THEIR COMMUNITY, AND PEOPLE WITH THE	AS WELL AS THEI OPPORTUNITY TO	R OWN LIVES THE YOUTHB O EARN THEIR GEDS, GAIN	UILD GULF COAST PROGRAM PRO HANDS-ON CONSTRUCTION EXPE	/HICH ENGAGES GULFPORT YOUTH VIDES 35 LOW-INCOME, OUT-OF- RIENCE, RECEIVE A LIVING
4d	Other program services	(Describe in Sche	dule O ) <b>See a</b>	also Additional Data fo	or Description	
	(Expenses \$	1,741,614 incl	udıng grants o	f\$	) (Revenue \$	73,866)
4e	Total program service ex	penses <b>)</b> -\$	21,986,61	1		

Part IV Checklist of Required Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	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? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	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? If "Yes," complete Schedule D, Part 1	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? If "Yes," complete Schedule D, Part III 2	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? If "Yes," complete Schedule D, Part IV	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	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	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? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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? If "Yes," complete Schedule F, Parts II and IV	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 ? If "Yes," complete Schedule F, Parts III and IV.	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? If "Yes," complete Schedule G, Part I (see instructions)	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? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	22		Νο
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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	30	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable .			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	<b>1b</b> 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
h	return			
_		2b	Yes	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		   <sub>N</sub>
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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	Yes	
ь	,		103	
	If "Yes," enter the name of the foreign country FI  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N N
_	services provided to the payor?	_		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		N
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		N
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	,,		
	Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
а	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		
ı	Section 501(c)(7) organizations. Enter			
	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			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)........			
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	•		
а	Is the organization licensed to issue qualified health plans in more than one state?	43.		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
	المما	i	İ	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N.

**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.

Check if Schedule O	contains a response to an	guestion in this Part VI	_	_	_	_	_	_	_	_	_	. I
Check ii Schedale o	contains a response to an	question in time i art vi	•	•	•	•		•	•		•	-,

	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		N o
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	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		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		W	N-
10-	Dana the auranimation have local aboutour humanitae au offiliate 2	10a	Yes Yes	No
	Does the organization have local chapters, branches, or affiliates?	IUa	res	
	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	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this 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		Νο
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?			
а	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 15a or 15b, 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		Νο
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		
	ection C. Disclosure	TOD		
	List the States with which a copy of this Form 990 is required to be filed MA, MS			

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

Own website 🔽 Another's website 🔽 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization MARIEL GONZALES CFO
  58 DAY STREET
  SOMERVILLE, MA 02144
  (617) 741-1231

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

Check if Schedule O contains a response to any question in this Part VII . . . . . . . . . . . . . .

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

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

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

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

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

(A) Name and Title	(B) A verage hours	Posi t	(( tion ( hat a	che		II.		( <b>D)</b> Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) ROY PRIEST CHAIRMAN	1 00	х						0	0	0
(2) LEROY LOOPER CHAIRMAN EMERITUS	2 00	х						0	0	0
(3) STANLEY RUMBAUGH TREASURER	5 00	х						0	0	0
(4) MELWN COLON SECRETARY	2 00	х						0	0	0
(5) JOHNNY MACK BOARD MEMBER	1 00	х						0	0	0
(6) DAVID M ABROMOWITZ ESQ BOARD MEMBER	20 00	х						0	0	0
(7) ANTOINE BENNETT BOARD MEMBER	50	х						0	0	0
(8) MICHELLE COURTON BROWN BOARD MEMBER	50	х						0	0	0
(9) LARRY DELCARLO BOARD MEMBER	1 00	х						0	0	0
(10) KAREN FULBRIGHT-ANDERSON BOARD MEMBER	1 00	х						0	0	0
(11) CLIFF JOHNSON BOARD MEMBER	2 00	х						0	0	0
(12) ANDREW HAHN BOARD MEMBER	2 00	х						0	0	0
(13) SIKINA LEE BOARD MEMBER	50	х						0	0	0
(14) KAREN PITTMAN BOARD MEMBER	50	х						0	0	0
(15) EIMY SANTIAGO BOARD MEMBER	50	х						0	0	0
(16) ROBERT CURVIN BOARD MEMBER	50	Х						0	0	0

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

<b>(A)</b> Name and Title	(B) Average hours	Posi t	tion ( hat a	che	')			(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(17) ANTONIO RAMIREZ BOARD MEMBER	1 00	х						0	0	0
(18) FRANK DAVIS BOARD MEMBER	2 00	х						О	0	0
(19) TRAVIS ALLEN BOARD MEMBER	2 00	х						О	0	0
(20) KAREEMA BARR BOARD MEMBER	1 00	х						0	0	0
(21) DOROTHY STONEMAN PRESIDENT, YB USA/CEO	40 00			х				136,984	0	1,373
(22) TIMOTHY CROSS PRESIDENT, YB INTERNATIONAL	40 00			х				132,851	0	18,644
(23) SANGEETA TYAGI CHIEF PROGRAM OFFICER	40 00			х				118,344	0	15,428
(24) MARIEL GONZALES CHIEF FINANCIAL OFFICER	40 00			х				113,760	0	18,326
(25) LISSETTE RODRIGUEZ SR VP FOR FIELD DEV & PROGRAM EXCELLENCE	40 00			х				88,280	0	15,416
(26) KAREN WILLIAMS SR FINANCE DIR & CORPORATE CONTROLLER	40 00					х		104,866	0	20,561
(27) JOHN BELL VP OF LEADERSHIP & ACADEMY FOR TRANSFORMATION	40 00					х		103,180	0	23,066
(28) CHARLES CLARK VP OF ASSET DEVELOPMENT	40 00					х		100,685	0	15,472
1b Sub-Total							۰			
c Total from continuation sheets to	Part VII, Secti	ion A .				<b>&gt;</b>				
d Total (add lines 1b and 1c)							►	898,950	0	128,286

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
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? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

<b>(A)</b> Name and business address	( <b>B</b> ) Description of services	(C) Compensation
EDUCATION NORTHWEST 101 SW MAIN ST STE 500 PORTLAND, OR 97204	TECHNICAL ASSISTANCE	442,135
HOMEBUILDERS INSTITUTE 1201 15TH ST NW 6TH FLOOR WASHINGTON, DC 20005	TECHNICAL ASSISTANCE	161,430
MARY DUFFY AND ASSOCIATES 350 SECOND STREET MONTARA, CA 94037	TECHNICAL ASSISTANCE	144,900

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 >3

vart (	Statement of Revenue	(A) Total revenue	(B) Related or exempt function		excluded from tax under sections
Contributions, gifts, grants and other similar amounts	1aFederated campaigns.1abMembership duescFundraising eventsdRelated organizationseGovernment grants (contributions)1efAll other contributions, gifts, grants, and similar amounts not included abovegNoncash contributions included in lines 1a-1f \$	1 1 1 7			513, or 514
	h Total. Add lines 1a-1f	<del> </del>	205,546		
Program Service Revenue	c d e f All other program service revenue				
<u>~</u>	g Total. Add lines 2a-2f	142,225			142,22
	(i) Real (ii) Personal  b Less rental expenses c Rental income or (loss) d Net rental income or (loss)				
	(i) Securities (ii) Other  from sales of assets other than inventory  b Less cost or other basis and sales expenses c Gain or (loss)  (i) Securities (ii) Other  608,802  554,469	54,333			54,33
Other Revenue	d Net gain or (loss)	0			5.,,55
J	c Net income or (loss) from fundraising events	-10,560			-10,560
	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 Cod				
	TIA LOAN FUND MGMT FEES  D PRODUCTS  C OTHER REVENUE  D All other revenue	18,750 199 4,186	4,186		
	e Total. Add lines 11a-11d	23,981 26,382,610	229,527	orm <b>990</b> (2	

	990 (2010)				Page <b>10</b>
Par	t IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	11,395,387			ехрепзез
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	11,030,000	22,030,000	-	
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	653,711	501,746	138,764	13,201
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	4,216,325	3,356,343	767,736	92,246
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	776,308	619,580	140,143	16,585
10	Payroll taxes	458,673	364,262	84,553	9,858
а	Fees for services (non-employees) Management				
ь	Legal	3,872	2,898	967	7
c	Accounting	59,442	2,800	56,642	
d	Lobbying	50,433	50,433		
e	Professional fundraising services See Part IV, line 17	33,536			33,536
f	Investment management fees				
g	Other	15,107	439	14,668	
12	Advertising and promotion	12,124	355	11,769	
13	Office expenses	101,352	60,270	36,736	4,346
14	Information technology	122,091	112,082	7,662	2,347
15	Royalties				
16	Occupancy	515,724	390,984	104,857	19,883
17	Travel	2,105,736	2,049,921	47,826	7,989
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	47,945		47,945	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	105,000	79,603	21,348	4,049
23	Insurance	35,592	15,598	19,994	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	CONSULTING	1,711,554	1,619,553	82,427	9,574
b	SUBCONTRACTS	911,516	911,516		
c	MISCELLANEOUS	188,015	127,604	60,067	344
d	MINOR EQUIPMENT, CONSTR	130,756	21,527	109,229	
e	DONATED GOODS	121,030	48,307	72,723	
f	All other expenses	279,772	255,403	16,938	7,431
25	Total functional expenses. Add lines 1 through 24f	24,051,001	21,986,611	1,842,994	221,396
26	Joint costs. Check here ► ☐ If following  SOP 98-2 (ASC 958-720) 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 353.616 75,735 1 2.168.425 2 4,302,126 2 Savings and temporary cash investments . . . . . . . 5,953,431 7,267,191 3 131,440 116,397 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 6 7 8 8 Prepaid expenses and deferred charges . . . . 112,911 158,585 10a Land, buildings, and equipment cost or other basis Complete 878,477 10a Part VI of Schedule D 492.075 ь Less accumulated depreciation . . . . . 10b 392,041 10c 386,402 5.493.074 6.153.407 11 11 76,197 12 56,633 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 1,031,127 15 931,167 15 16 15,712,262 16 19,447,643 Total assets. Add lines 1 through 15 (must equal line 34) . . . 2.735.872 17 3,693,134 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 909.126 25 806.737 Other liabilities Complete Part X of Schedule D . . . . . 26 3,644,998 26 4.499.871 **Total liabilities.** Add lines 17 through 25 . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . -150,610 4.509 Temporarily restricted net assets . . . . . 6,717,874 9,443,263 28 Fund 5,500,000 5,500,000 29 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds . . . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 12,067,264 33 14,947,772 33 Total net assets or fund balances . . . . 34 Total liabilities and net assets/fund balances . . . . . 15.712.262 19,447,643

1401	Check if Schedule O contains a response to any question in this Part XI			.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)				
		1		26,3	382,610
2	Total expenses (must equal Part IX, column (A), line 25)	2		24,0	051,001
3	3 Revenue less expenses Subtract line 2 from line 1				
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4				
5	Other changes in net assets or fund balances (explain in Schedule O)	5		5	548,899
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		14,9	947,772
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	৮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t 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		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3а	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?	•	3a	Yes	
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

**Employer identification number** 

### CHIC GIAN HIG PINC DO NOT I ROCES

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

h

## **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

2010

Open to Public Inspection

YOUTHBUILD USA INC AND AFFILIATE 22-3076454 Reason for Public Charity Status (All organizations must complete this part.) See instructions organization is not a private foundation because it is (For lines 1 through 11, check only one box ) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 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 Type I **b** Type II c Type III - Functionally integrated Type III - Other 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) 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 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) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) list your gove docume	e ion in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi)  Is the organization in col (i) organized in the US?		(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
-									
Total									

Provide the following information about the supported organization(s)

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

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

	under Part III. II u	ie organizacion	Talls to quality	ander the tests	listed below, pie	ease co	ilibiete i	art III.)
	ection A. Public Support	T		Т	Г			
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2	010	<b>(f)</b> Total
1	·							
	membership fees received (Do no	t 15,934,60	20,328,247	21,909,294	18,968,367	25	,967,085	103,107,598
	ınclude any "unusual	20,50.,60	20,020,2				,,,,,,,,,,	200,201,020
_	grants ") Tax revenues levied for the							
2	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	15,934,60	20,328,247	21,909,294	18,968,367	25	,967,085	103,107,598
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							17,194,099
	supported organization) included on line 1 that exceeds 2% of the							17,194,099
	amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5							85,913,499
	from line 4							. ,
	ection B. Total Support endar year (or fiscal year	1	1					
Сак	beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	<b>(e)</b> 20	10	<b>(f)</b> Total
7	A mounts from line 4	15,934,605	20,328,247	21,909,294	18,968,367	25,	,967,085	103,107,598
8	Gross income from interest,							
	dividends, payments received							
	on securities loans, rents,	195,888	174,512	159,675	127,435		196,768	854,278
	royalties and income from similar sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income Do not include gain or loss from the sale of							
	capital assets (Explain in Part	89,158	49,100	60,502	63,803		23,981	286,544
	IV)							
11	Total support (Add lines 7							104,248,420
	through 10)							
12	Gross receipts from related activi	, ,	•			12		6,530,341
13	First Five Years If the Form 990 is	for the organizat	tion's first, second	l, thırd, fourth, or f	fifth tax year as a	501(c)(3	3) organız	′
	check this box and <b>stop here</b>							<b>▶</b> □
S	ection C. Computation of Pu	blic Support	Percentage					
14	Public Support Percentage for 201			11 column (f))		14		82 410 %
15	Public Support Percentage for 200	)9 Schedule A. P	art II. line 14			15		84 790 %
	33 1/3% support test—2010. If th	·	·	v on line 13 and	lina 14 is 33 1/20/		chack t	
LUA	and <b>stop here.</b> The organization qu	_		•	iiile 14 is 33 1/370	or more	, check t	IIIs box ▶▼
b	33 1/3% support test-2009. If th	•			a, and line 15 is :	3 3 1/3%	or more,	check this
	box and <b>stop here.</b> The organization			-				<b>►</b> □
17a	10%-facts-and-circumstances tes							
	is 10% or more, and if the organiz in Part IV how the organization me							ed
	organization	ets the lacts an	ia circumstances	test The organiz	ation quannes as	a publici	y support	<b>.</b> □
ь	10%-facts-and-circumstances tes	<b>t—2009.</b> If the or	ganızatıon dıd not	check a box on lir	ne 13, 16a, 16b, d	or 17a an	id line	,
	15 is 10% or more, and if the orga			•		-		
	Explain in Part IV how the organiz	ation meets the "	facts and circums	tances" test The	organization qual	lifies as a	a publicly	
18	supported organization  Private Foundation If the organiza	ition did not chec	k a box on line 13	. 16a. 16h 17a o	r 17b, check this	hox and	see	<b>▶</b> □
	instructions	c.on ala not chec	a box on fille 13	, 100, 100, 1700	. 170, CHECK HIS	DON UNU		<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15		16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for <b>2010</b> (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. 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

33 1/3% support tests—2009. 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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

#### **Additional Data**

Software ID: Software Version:

**EIN:** 22-3076454

Name: YOUTHBUILD USA INC AND AFFILIATE

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

#### 4d. Other program services

(Code )(Expenses \$ 1,741,614 including grants of \$ ) (Revenue \$ 73.866) INTERNATIONAL YOUTHBUILD INTERNATIONAL, A DIVISION OF YOUTHBUILD USA, IS BUILDING A GLOBAL NETWORK OF PROGRAMS DEDICATED TO REACHING, INSPIRING, PREPARING, AND CONNECTING THE WORLD'S UNEMPLOYED YOUNG PEOPLE TO VIABLE EMPLOYMENT OPPORTUNITIES IN 2010, YOUTHBUILD INTERNATIONAL WORKED WITH 15 INTERNATIONAL ORGANIZATIONS THAT ENGAGED AN ESTIMATED 7,000 UNEMPLOYED YOUNG PEOPLE IN CANADA, CENTRAL AMERICA, ISRAEL, MEXICO, AND SOUTH AFRICA YOUTHBUILD INTERNATIONAL PROVIDED CONSULTATION, TRAINING, COACHING, RESOURCE DEVELOPMENT, MATERIALS ADAPTATION, KNOWLEDGE AND DATA MANAGEMENT TO SUPPORT THE PLANNING, ADAPTATION, AND IMPLEMENTATION OF LOCALLY OPERATED YOUTHBUILD PROGRAMS AND SCALED NETWORKS OF NATIONAL AND REGIONAL YOUTHBUILD PROGRAMS ADDITIONALLY, YOUTHBUILD INTERNATIONAL PROVIDED CONSULTATION, TRAINING, YOUTH LIVELIHOOD SYSTEMS DESIGN, MATERIALS DEVELOPMENT, ASSESSMENT, AND RESEARCH SERVICES TO GOVERNMENTS, MULTI-LATERAL INSTITUTIONS, PUBLIC AND PRIVATE EMPLOYERS, SCHOOLS, NGOS, AND YOUTH NETWORKS IN AFRICA, EUROPE, LATIN AMERICA, ASIA, MIDDLE EAST, AND NORTH AMERICA EXPENSES -\$882,046 REVENUE - \$5,981PUBLIC RELATIONS YOUTHBUILD USA BUILDS PUBLIC SUPPORT TO EXPAND YOUTHBUILD BY WORKING TO GAIN VISIBILITY THROUGH VARIED MEDIA SOURCES, BUILDS THE PUBLIC WILL TO INVEST IN OPPORTUNITIES TO RECONNECT YOUTH TO EDUCATION, EMPLOYMENT, AND SERVICE, AND PROVIDES YOUTHBUILD GRADUATES WITH OPPORTUNITIES FOR PUBLIC SPEAKING EXPENSES - \$271,603ADVOCACY YOUTHBUILD USA REPRESENTS AND ADVOCATES FOR YOUTHBUILD PROGRAMS AND POLICIES THAT EMBRACE RECONNECTING DISCONNECTED. LOW-INCOME. AND INCARCERATED YOUTH TO EDUCATION, CAREERS, SERVICE AND LEADERSHIP THROUGHOUT THE UNITES STATES, INCLUDING DIRECT LOBBYING, GRASSROOTS LOBBYING, AND GENERAL ADVOCACY TO INCREASE FEDERAL FUNDING FOR LOCAL YOUTHBUILD PROGRAMS, COORDINATING THE NATIONAL YOUTHBUILD COALITION OF NEARLY 1,000 MEMBERS TO BUILD MAJORITY BIPARTISAN SUPPORT FOR YOUTHBUILD PROGRAMS, SUPPORTING THE DEVELOPMENT OF STATE-LEVEL YOUTHBUILD COALITIONS TO SECURE STATE FUNDING AND SHAPE PUBLIC POLICY REGARDING LOW-INCOME YOUTH, AND SUPPORTING POLICIES AND COALITIONS TO DIMINISH POVERTY IN THE UNITES STATES AND INTERNATIONALLY EXPENSES - \$255,515YOUTH ON BOARD YOUTH ON BOARD PROVIDES TRAINING AND TECHNICAL ASSISTANCE TO SCHOOLS AND ORGANIZATIONS TO ASSIST IN BUILDING YOUTH VOICE INTO THEIR OPERATIONS AND TO HELP YOUNG PEOPLE MAKE A DIFFERENCE IN THEIR COMMUNITIES EXPENSES - \$220.679 REVENUE - \$67.8850THER YOUTHBUILD USA MAKES GIFTS TO YOUTHBUILD GRADUATES TO ASSIST IN BUILDING ASSETS BY PROVIDING MATCHING FUNDS FOR INDIVIDUAL DEVELOPMENT ACCOUNTS OR MATCHED SAVINGS ACCOUNTS, HELPING THEM REMAIN IN AND COMPLETE COLLEGE, ADVANCING THEIR CAREERS, AND OVERCOMING UNEXPECTED SETBACKS EXPENSES - \$111,770

DLN: 93493319068831

# OMB No 1545-0047

## **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.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ 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

		Name of the organization YOUTHBUILD USA INC AND AFFILIATE			ntıfıcatıon number			
100	STITIBOTED OSA TIVE AND ALTIELATE			22-3076454	1			
ar	t I-A Complete if the or	ganization is exempt und	er section 501(	c) or is a section 52	7 organization.			
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign act	ivities in Part IV				
2	Political expenditures			▶	\$			
3	Volunteer hours							
aı	t I-B Complete if the or	ganization is exempt und	er section 501(	c)(3).				
1	•	tax incurred by the organization	_		\$			
2	Enter the amount of any excise	tax incurred by organization ma	nagers under sectio	n 4955 <b>&gt;</b>	\$			
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		┌ Yes ┌ No			
4a	Was a correction made?				┌ Yes			
b	If "Yes," describe in Part IV							
aı	t I-C Complete if the or	ganization is exempt und	er section 501(	c) except section 50	1(c)(3).			
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exemp	ot function activities 🕨	\$			
2	Enter the amount of the filing of exempt funtion activities	rganization's funds contributed to	o other organizations	s for section 527	\$			
	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b							
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	0-POL, line 17b	\$			
4	Did the filing organization file <b>I</b> Enter the names, addresses ar	Form 1120-POL for this year?	r (EIN) of all section	527 political organization	<del></del>			
4	Did the filing organization file <b>I</b> Enter the names, addresses ar  organization made payments I  amount of political contribution	Form 1120-POL for this year?	r (EIN) of all section r the amount paid fro nd directly delivered	527 political organization om the filing organization's to a separate political org	ns to which the filing funds Also enter the anization, such as a			
4	Did the filing organization file <b>I</b> Enter the names, addresses ar  organization made payments I  amount of political contribution	Form 1120-POL for this year?  Ind employer identification numbe  For each organization listed, ente  Instead that were promptly ar	r (EIN) of all section r the amount paid fro nd directly delivered	527 political organization om the filing organization's to a separate political org	funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received			
3 4 5	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			
4	Did the filing organization file <b>I</b> Enter the names, addresses are organization made payments is amount of political contribution separate segregated fund or a	Form 1120-POL for this year?  Ind employer identification numbe For each organization listed, ente has received that were promptly ar political action committee (PAC)	r (EIN) of all section r the amount paid fro nd directly delivered If additional space	527 political organization om the filing organization's to a separate political orgis needed, provide inform  (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,			

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) an	d filed Form 5768	(election
Α	Check I if the filing organization belongs to a	an affiliated group		
В	Check I if the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means an		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lobbying)	18,107	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	32,326	
c	Total lobbying expenditures (add lines 1a and 1	b)	50,433	
d	Other exempt purpose expenditures		24,000,568	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	24,051,001	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	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		
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0	

# 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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	( <b>d)</b> 2010	(e) Total				
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000				
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000				
_c	Total lobbying expenditures	63,536	55,745	24,151	50,433	193,865				
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000				
е —	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000				
f	Grassroots lobbying expenditures	9,121	11,768		18,107	38,996				

art II-B	Complete if the organization is exempt under section 501(c)(3) and has	NOT filed Fo	rm 5768
	(election under section 501(h)).		

		1.	a)		(b)	
		Yes	No		\ moun	nt
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					
а	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					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [					n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c	)(5), (	or se		
	501(c)(6).	501(c	)(5), « 		Yes	No
1	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	501(c	)(5), ( 	1		
1 2	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c	)(5), ( 	1 2		
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c	)(5), (	1 2 3	Yes	No
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c	)(5), (	1 2 3	Yes	No
1 2 3 Par	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  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).	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  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).  Current year	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  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).  Current year  Carryover from last year	501(c II-A, 1 2a 2b	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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	501(c II-A, 1 2a 2b 2c	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3	)(5), (	1 2 3	Yes	No

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 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319068831

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

nme of the organization UTHBUILD USA INC AND AFFILIATE	Employer identification number
art I Organizations Maintaining Donor Advised Funds or Other Similar	22-3076454
organizations maintaining bollor Advised Funds or Other Similar organization answered "Yes" to Form 990, Part IV, line 6.	runds of Accounts. Complete in
(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year	
Aggregate contributions to (during year)	
Aggregate grants from (during year)	
Aggregate value at end of year	
Did the organization inform all donors and donor advisors in writing that the assets held in do funds are the organization's property, subject to the organization's exclusive legal control?	onor advised <b>Yes</b> [
Did the organization inform all grantees, donors, and donor advisors in writing that grant fundused only for charitable purposes and not for the benefit of the donor or donor advisor, or for conferring impermissible private benefit	any other purpose Yes I
<b>rt II</b> Conservation Easements. Complete if the organization answered "Yes"	' to Form 990, Part IV, line 7.
Protection of natural habitat  Preservation of a  Preservation of a  Complete lines 2a-2d if the organization held a qualified conservation contribution in the for	an historically importantly land area a certified historic structure rm of a conservation
easement on the last day of the tax year	Hald at the Find of the Wass
Total number of conservation easements	Held at the End of the Year
	<del>   </del>
Total acreage restricted by conservation easements  Number of conservation easements on a certified historic structure included in (a)	2b
· ·	2c
Number of conservation easements included in (c) acquired after 8/17/06	2d
Number of conservation easements modified, transferred, released, extinguished, or termina	ated by the organization during
the taxable year 🗠	
Number of states where property subject to conservation easement is located 🛌	
Does the organization have a written policy regarding the periodic monitoring, inspection, ha enforcement of the conservation easements it holds?	andling of violations, and <b>Yes [</b>
Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation ease	ements during the year ►
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easemer	nts during the year ► \$
Does each conservation easement reported on line 2(d) above satisfy the requirements of satisfy the 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ection
In Part XIV, describe how the organization reports conservation easements in its revenue a balance sheet, and include, if applicable, the text of the footnote to the organization's financithe organization's accounting for conservation easements	• •
<b>rt III</b> Organizations Maintaining Collections of Art, Historical Treasures Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	s, or Other Similar Assets.
If the organization elected, as permitted under SFAS 116, not to report in its revenue stater art, historical treasures, or other similar assets held for public exhibition, education or research provide, in Part XIV, the text of the footnote to its financial statements that describes these	arch in furtherance of public service,
If the organization elected, as permitted under SFAS 116, to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research provide the following amounts relating to these items	•
(i) Revenues included in Form 990, Part VIII, line 1	<b>►</b> \$
(ii) Assets included in Form 990, Part X	<b>►</b> \$
If the organization received or held works of art, historical treasures, or other similar assets following amounts required to be reported under SFAS 116 relating to these items	• •
Revenues included in Form 990, Part VIII, line 1	<b>▶</b> \$
Assets included in Form 990, Part X	<b>►</b> \$

	Using the organization's accession and other										niciniaea)
_	items (check all that apply)										
а	Public exhibition		d	j Loan	orexcr	nange progr	ams				
b	Scholarly research		e	┌ Othe	r						
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	v they furth	er the o	rganızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							ıılar	Г	Yes	Г No
Pai	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ai					n answere	d "Y	es" to Fo	rm 990	),	
1a	Is the organization an agent, trustee, custooncluded on Form 990, Part X?	lian or other interme	diary	for contribu	ıtıons o	or other ass	ets r	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ing table		Γ			A mou	ınt	
с	Beginning balance					F	1c				
d	Additions during the year					-	1d				
e	Distributions during the year						1e				
f	Ending balance					<u> </u>	1f				
2a	Did the organization include an amount on F	orm 990 Part X line	217 د			L				Yes	
	If "Yes," explain the arrangement in Part XI		- 21.						,	103	, 110
	rt V Endowment Funds. Complete		n ans	wered "Ye	s" to F	Form 990	Par	t IV line	10		
	Elia Willelle Falla Si Complete	(a)Current Year		Prior Year		wo Years Back		Three Years		e)Four Y	ears Back
1a	Beginning of year balance	5,627,877		4,803,77	8	6,464,18	37				
b	Contributions										
c	Investment earnings or losses	733,570		951,34	5	-1,490,54	15				
d	Grants or scholarships										
e	Other expenditures for facilities and programs	-105,408		-110,23	0	-150,02	28				
f	Administrative expenses	-22,859		-17,01	6	-19,83	36				
g	End of year balance	6,233,180		5,627,87	7	4,803,7	78				
2	Provide the estimated percentage of the yea	r end balance held a	as								
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 100 000 %										
с	Term endowment ►										
	reilireildowillellt 🗜										
3a	Are there endowment funds not in the posse	ssion of the organiza	ation	that are hel	d and a	dministered	for	the			
	Are there endowment funds not in the posse organization by		ation	that are hel	d and a	dmınıstere	d for	the		Yes	No
			ation .	that are hel	d and a	dministere	for	the 	3a(i)	<b>Yes</b> Yes	
3a	organization by  (i) unrelated organizations					dmınıstered	for	the 	3a(ii)	+	No No
3a b	organization by  (i) unrelated organizations	ns listed as required	 d on S	 chedule R?			d for	the		+	
3a b 4	organization by  (i) unrelated organizations  (ii) related organizations  If "Yes" to 3a(II), are the related organization  Describe in Part XIV the intended uses of the	ns listed as required e organization's enc	d on S	 chedule R? ent funds				the	3a(ii)	+	
3a b 4	organization by  (i) unrelated organizations	ns listed as required e organization's enc	d on S	chedule R? ent funds ee Form S	 	art X, line	10.		3a(ii) 3b	+	
3a b 4	organization by  (i) unrelated organizations  (ii) related organizations  If "Yes" to 3a(II), are the related organization  Describe in Part XIV the intended uses of the	ns listed as required e organization's enc	d on S	 chedule R? ent funds			10.	(c) Accum	3a(ii) 3b	Yes	
b 4 Par	organization by  (i) unrelated organizations	ns listed as required e organization's enc	d on S	chedule R? ent funds ee Form 9		art X, line	10.	(c) Accum	3a(ii) 3b	Yes	No
b 4 Par	organization by  (i) unrelated organizations	ns listed as required e organization's enc	d on S	chedule R? ent funds ee Form 9		art X, line	10.	(c) Accum	3a(ii) 3b	Yes	No
b 4 Pat	organization by  (i) unrelated organizations	ns listed as required e organization's enc	d on S	chedule R? ent funds ee Form 9		(b)Cost or or basis (oth	10.	(c) Accum	3a(ii) 3b	Yes	No
3a b 4 Par 1a b c	organization by  (i) unrelated organizations	ns listed as required e organization's enc	d on S	chedule R? ent funds ee Form 9		art X, line (b)Cost or or basis (oth	10. other	(c) Accum	3a(ii) 3b ulated	Yes	No pok value
b 4 Pat	organization by  (i) unrelated organizations	ns listed as required e organization's end	d on S dowme	chedule R? ent funds ee Form S (a) Cost of basis (invented)	90, Pa	(b)Cost or obasis (oth		(c) Accum	3a(ii) 3b  ulated atton	Yes	No pok value

Part VII Investments—Other Securities. See  (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Se		<u>.                                    </u>
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(B) Book value	Cost or end-of-year market value
Totali (Colaini (2) Should equal term 330, tare 1, col (2) mile 13 )	<u>•                                    </u>	
Part IX Other Assets. See Form 990, Part X, II  (a) Descri		(b) Book value
(4) 5 6 6 6 1	p 1.10.11	(D) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15 )	
Part X Other Liabilities. See Form 990, Part 3		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
ANNUITY PAYMENT LIABILITY	62,665	
FUNDS HELD FOR OTHERS LIABILITY	744,072	
	-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	806,737	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,382,610
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	24,051,001
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,331,609
4	Net unrealized gains (losses) on investments	4	550,970
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-2,071
9	Total adjustments (net) Add lines 4 - 8	9	548,899
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,880,508
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	27,099,279
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
Ь	Donated services and use of facilities 2b 163,270		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 2,429		
e	Add lines <b>2a</b> through <b>2d</b>	2e	716,669
3	Subtract line <b>2e</b> from line <b>1</b>	3	26,382,610
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	26,382,610
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	24,218,771
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	167,770
3	Subtract line <b>2e</b> from line <b>1</b>	3	24,051,001
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	24,051,001

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

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

Ident if ier	Return Reference	Explanation
		PART IV, LINE 11F THE AGENCY FOLLOWS THE
		ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES
		STANDARD WHICH REQUIRES THE AGENCY TO REPORT
		UNCERTAIN TAX POSITIONS, RELATED INTEREST AND
		PENALTIES, AND TO ADJUST ITS ASSETS AND LIABILITIES
		RELATED TO UNRECOGNIZED TAX BENEFITS AND
		ACCRUED INTEREST AND PENALTIES ACCORDINGLY AS
		OF DECEMBER 31, 2010, THE AGENCY DETERMINED THAT
		THERE ARE NO MATERIAL UNRECOGNIZED TAX BENEFITS
		TO REPORT THE AGENCY IS SUBJECT TO REGULAR AUDIT
		BY TAX AUTHORITIES THE AGENCY BELIEVES IT HAS
		APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON
		ITS TAX RETURNS THE AGENCY FILES INFORMATIONAL
		RETURNS IN THE UNITED STATES (FEDERAL),
		MASSACHUSETTS AND MISSISSIPPI (STATE)
		JURISDICTIONS THESE RETURNS ARE GENERALLY
		SUBJECT TO EXAMINATION BY TAX AUTHORITIES FOR
		THE LAST THREE YEARS PART V, LINE 4 THE
		ORGANIZATION USES THE EARNINGS FROM THE
		ENDOWMENT FOR GENERAL OPERATING SUPPORT AND
		NEW INITIATIVES PART XI, LINE 8 CHANGE IN VALUE OF
		ASSETS HELD IN TRUST - \$2,429 LOSS ON DISPOSAL OF
		ASSETS - \$(4,500) PART XII, LINE 2D CHANGE IN VALUE
		OF ASSETS HELD IN TRUST - \$2,429 PART XIII, LINE 2D
		LOSS ON DISPOSAL OF ASSETS - \$4,500

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Statement of Activities Outside the United States

OMB No 1545-0047

DLN: 93493319068831

Open to Public

Department of the Treasury Internal Revenue Service

**SCHEDULE F** 

(Form 990)

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

► Attach to Form 990. ► See separate instructions. Name of the organization YOUTHBUILD USA INC AND AFFILIATE

**Employer identification number** 

22-3076454 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. 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 ┌ Yes No For grant makers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Part V if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures for region (by type) (e g , program service, describe offices in the employees or region/investments fundraising, program region agents in region or specific type of ındependent services, investments, service(s) in region in region contractors grants to recipients located ın the region) CENTRAL AMERICA AND THE 0 PROGRAM PROGRAM SERVICES 304,988 FOCUSED ON CARIBBEAN PROVIDING TRAINING AND TECHINICAL ASSISTANCE TO SUPPORT THE PLANNING, FINANCING, IMPLEMENTATION AND MANAGEMENT OF ADAPTED YOUTHBUILD PROGRAMS IN EACH COUNTRY ADDITIONALLY, CONSULTING SERVICES WERE PROVIDED FOCUSED ON THE DESIGN AND IMPLEMENTATION OF YOUTH EMPLOYMENT AND TRAINING PROGRAMS AND үоитн ENTREPRENEURSHIP PROGRAMS EUROPE 1 PROGRAM PROGRAM SERVICES 42,082 FOCUSED ON PROVIDING TRAINING AND TECHINICAL ASSISTANCE TO SUPPORT THE PLANNING, FINANCING, IMPLEMENTATION AND MANAGEMENT OF ADAPTED YOUTHBUILD PROGRAMS IN EACH COUNTRY ADDITIONALLY, CONSULTING SERVICES WERE PROVIDED FOCUSED ON THE DESIGN AND IMPLEMENTATION OF YOUTH EMPLOYMENT AND TRAINING PROGRAMS AND YOUTH ENTREPRENEURSHIP PROGRAMS MIDDLE EAST AND NORTH 0 0 PROGRAM PROGRAM SERVICES 18,865 AFRICA FOCUSED ON PROVIDING TRAINING AND TECHINICAL ASSISTANCE TO SUPPORT THE PLANNING, FINANCING, IMPLEMENTATION AND MANAGEMENT OF ADAPTED YOUTHBUILD PROGRAMS IN EACH COUNTRY ADDITIONALLY. CONSULTING SERVICES WERE PROVIDED FOCUSED ON THE DESIGN AND IMPLEMENTATION OF YOUTH EMPLOYMENT AND TRAINING PROGRAMS AND үоитн ENTREPRENEURSHIP PROGRAMS NORTH AMERICA 0 0 PROGRAM PROGRAM SERVICES 6,142 FOCUSED ON PROVIDING TRAINING AND TECHINICAL ASSISTANCE TO SUPPORT THE PLANNING, FINANCING, IMPLEMENTATION AND MANAGEMENT OF ADAPTED YOUTHBUILD PROGRAMS IN EACH COUNTRY ADDITIONALLY, CONSULTING SERVICES WERE PROVIDED FOCUSED ON THE DESIGN AND IMPLEMENTATION OF YOUTH EMPLOYMENT AND TRAINING PROGRAMS AND үоитн ENTREPRENEURSHIP PROGRAMS SUB-SAHARAN AFRICA 0 0 PROGRAM PROGRAM SERVICES 344,686 FOCUSED ON PROVIDING TRAINING AND TECHINICAL ASSISTANCE TO SUPPORT THE PLANNING, FINANCING, IMPLEMENTATION AND MANAGEMENT OF ADAPTED YOUTHBUILD PROGRAMS IN EACH COUNTRY ADDITIONALLY, CONSULTING SERVICES WERE PROVIDED FOCUSED ON THE DESIGN AND IMPLEMENTATION OF YOUTH EMPLOYMENT AND TRAINING PROGRAMS AND МОПТН ENTREPRENEURSHIP PROGRAMS SOUTH AMERICA 0 0 PROGRAM 165,283 PROGRAM SERVICES FOCUSED ON PROVIDING TRAINING AND TECHINICAL ASSISTANCE TO SUPPORT THE PLANNING, FINANCING, IMPLEMENTATION AND MANAGEMENT OF ADAPTED YOUTHBUILD PROGRAMS IN EACH COUNTRY ADDITIONALLY, CONSULTING SERVICES WERE PROVIDED FOCUSED ON THE DESIGN AND IMPLEMENTATION OF YOUTH EMPLOYMENT AND TRAINING PROGRAMS AND YOUTH ENTREPRENEURSHIP PROGRAMS 882,046 3a Sub-total **b** Total from continuation sheets 0 to Part I 882,046 c Totals (add lines 3a and 3b) 0 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2010

	(b) IRS code	(c) Region	(d) Purpose of	(e) A mount of	(f) Manner of	(g) A mount of	(h) Description	(i) Method of
(a) Name of organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, othe
-								
Enter total nu tax-exempt b	imber of recipie by the IRS, or fo	nt organizations lis r which the grante	ted above that are i e or counsel has pro	recognized as charit ovided a section 50:	nes by the foreign c (c)(3) equivalency	ountry, recognized letter	as . ►	

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>.                                    </u>		!		
			<u>.                                    </u>				
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
					!		
			1		,		

# Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	r	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

information.  Identifier	ReturnReference	Explanation
racitimer	Returniterence	Explanation

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DLN: 93493319068831

SCHEDULE G (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public

Internal Revenue Service	Attach to Form 990 or Form 990-EZ. F See separate instructions.	Inspection
Name of the organization		Employer identification number
YOUTHBUILD USA INC	AND AFFILIATE	
		22-3076454

lame of the organization OUTHBUILD USA INC AND AFFILIATE								Employer iden	tification number
OOTHBOILD OSA I	NC AND A	VELITA I E						22-3076454	
Part I Fundra	ising Ac	<b>tivities.</b> Complete	e if the c	rganıza	tion	answered "Yes"	to Form	n 990, Part IV	, line 17.
<b>1</b> Indicate whethe	r the orga	nızatıon raısed funds	through a	ny of the	foll	owing activities Ch	eck all t	hat apply	
a 🔽 Mail solicita	itions			e	Solicitation of non-government grants				
b 🔽 Internet and	de-mailso	licitations		f	7	Solicitation of government grants			
c   Phone solici	c Phone solicitations			g	Special fundraising events				
<b>d</b>	d In-person solicitations								
		a written or oral agre n Form 990, Part VII)							√ Yes Γ N
·	_	st paid individuals or st \$5,000 by the orga				•			
(i) Name and addr Individual or entity (fundra		(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(i	<b>v)</b> Gross receipts from activity	(or r fundra	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			res	140	1				<u> </u>

(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
JACKIE GELB 81 PRAIRIE AVENUE AUBURNDALE, MA 02466	PROFESSIONAL FUNDRAISER		No	0	33,536	0
Total			<b>&gt;</b>		33,536	

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

MA, MS

Pa	<b>Fundraising Events.</b> 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.					
			(a) Event #1  REAL ESTATE EVENT (event type)	(b) Event #2  OTHER EVENTS (event type)	(c) O ther Events  1 (total number)	(d) Total Events (Add col (a) through col (c))
£	1	Gross receipts	16,500	6,211		22,711
Revenue	2	Less Charitable contributions	16,500	6,211		22,711
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
မာ	5	Non-cash prizes				
anse.	6	Rent/facility costs				
Expenses	7	Food and beverages				
Direct	8	Entertainment				
ā	9	Other direct expenses .	5,879	4,681		10,560
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)	🛌	10,560
	11	Net income summary Combine li	nes 3 and 10 ın column (d	d)	•	-10,560
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Reveilue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
		Gross revenue				+
Ses	2	Cash prizes				_
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	Γ Yes % Γ No	☐ Yes % ☐ No	
	7	Direct expense summary Add line	s 2 through 5 ın column (	d)	•	
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	mn (d)	<u> </u>	
9		er the state(s) in which the organiza				
a b		the organization licensed to operate		n of these states?		· Fyes FNo
10a b		re any of the organization's gaming Yes," Explain			the tax year?	· · Fyes Fno

11	Does the organization operate ga	aming activities with nonmembers?		$\Gamma_{\text{Yes}}$ $\Gamma_{\text{No}}$				
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 (	jaming?		Г <sub>Yes</sub> Г <sub>No</sub>				
13	Indicate the percentage of gamin	ng activity operated in						
а	The organization's facility			1				
b	An outside facility		13b					
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and					
	Name 🟲							
	Address 🟲							
15a		ntract with a third party from whom th						
ь	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	5						
	Name 🟲							
	Address 🟲							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation l	<b>\$</b>						
	Description of services provided	<b>&gt;</b>						
	Director/officer	Employee	Independent contractor					
17	Mandatory distributions							
а		er state law to make charitable distrib						
p.				· Fyes Fno				
D		required under state law distributed activities during the tax year > \$	to other exempt organizations or spent					
Par			r responses to question on Schedule	e G (see				
	Identifier	ReturnReference	Explanation					

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DLN: 93493319068831 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

**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

**Grants and Other Assistance to Organizations,** 

**Inspection** 

Name of the organization						Employer identification	on number
YOUTHBUILD USA INC AND AFFILI	ATE					22-3076454	
Part I General Informatio	n on Grants and	l Assistance				•	
<ul> <li>Does the organization maintain the selection criteria used to aw</li> <li>Describe in Part IV the organization</li> </ul>	vard the grants or as:	sistance?					∨ Yes
Part II Grants and Other A Form 990, Part IV, line duplicated if additional	e 21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
<ul><li>2 Enter total number of section 50</li><li>3 Enter total number of other orga</li></ul>							96

	•	
Part III	Grants and Other Assistance to Individuals in the United S	tates. 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>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount 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.

Ident if ier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	·	SCHEDULE I, PART I, LINE 2 FOR PUBLICLY FUNDED GRANTS WE REQUIRE THE RECIPIENT ORGANIZATION TO REPORT TO US ON HOW THE FUNDS WERE SPENT AND THEIR ATTAINMENT OF PROGRAMMATIC GOALS FOR PRIVATELY FUNDED GRANTS WE REQUIRE THE RECIPIENT ORGANIZATION TO REPORT TO US ON THEIR ATTAINMENT OF PROGRAMMATIC GOALS, AND IN MOST CASES HOW THE FUNDS WERE SPENT FOR GIFTS TO YOUTH, WHICH INVOLVES SMALL AMOUNTS OF FUNDS, WE KNOW THE INTENDED USE OF THE FUNDS IN ADVANCE
		BUT NO SUBSEQUENT REPORTING IS REQUIRED

**Additional Data** 

PHILADELPHIA YOUTH

BROAD ST 3RD FL

FOR CHANGE1231 NORTH

PHILADELPHIA, PA 19122

PORTLAND YOUTHBUILD -

PORTLAND OR4816 SE

PORTLAND, OR 97266

92ND AVENUE

BILOXI HOUSING

BILOXI, MS 39533

**AUTHORITYPO BOX 447** 

OPERATION FRESH START

YOUTHBUILD - MADISON

1925 WINNEBAGO STREET

MADISON, WI 53704

HOLLANDALE SCHOOL

MS)1310 SOUTH

THEOBALD STREET

DISTRICT (HOLLANDALE

GREENVILLE, MS 38701

YOUTHBUILD COLUMBUS

- GAHANNA1183 ESSEX

COLUMBUS,OH 43201

METRO ATLANTA YOUTHBUILD268

EMERSON PARK

6126

**DEVELOPMENT CORP1405** 

EAST ST LOUIS, IL 62202

MIDWEST CORRECTIONAL

SERVICES - ROCKFORD

YOUTHBUILD DETROIT -

DETROIT1627 W

DETROIT, MI 48216

LAFAYETTE

CASA VERDE

BLVD

YOUTHBUILD - AIL 0

AUSTIN, TX 78741

AUSTIN1901 E BEN WHITE

ROCKFORD, IL 61101

917 S MAIN ST

STATE STREET PO BOX

100

LAWRENCE STREET SUITE

MARIETTA, GA 30060

(a) Name and address of

organization

or government

YOUTHBUILD MCLEAN COUNTY360 WYLIE DRIVE 37-1359165 SUITE 305 NORMAL, IL 61761

23-2728467

94-3123483

64-6000156

23-7108090

64-0786964

31-1333992

58-2081893

37-1265166

36-3842309

38-3136276

74-2197942

**(b)** EIN

Software ID:

**EIN:** 22-3076454

(d) A mount of cash

grant

683,044

658,529

553,178

411,044

372,439

317,198

316,641

299,113

286,680

285,546

282,105

270,880

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

Name: YOUTHBUILD USA INC AND AFFILIATE

(e) A mount of non-

cash

assistance

(f) Method of

valuation

(book, FMV, appraisal, other)

(g) Description of

non-cash assistance

**Software Version:** 

(c) IRC Code

section

ıf applıcable

501(C)(3)

**Return to Form** 

(h) Purpose of grant

IMPROVEMENT FOR

COMPLETION OF A POST SECONDARY CREDENTIAL,TO SUPPORT

ENGAGEMENT IN

SERVICE TO THE

COMMUNITY TO

BUILD LOW-INCOME HOUSING, TO CREATE A SOLID MENTORING **COMPONENT IN** YOUTHBUILD PROGRAMS,TO SUPPORT

HEALTHCARE, GREEN CAREER PATHWAYS

OPERATING COSTS TO PROVIDE GRANTS TO PROGRAMS PARTICIPATING IN THE IDA PROGRAM,

IMPROVEMENT FOR

DIPLOMAS AND POST

COMPLETION OF A POST SECONDARY CREDENTIAL,TO

PARTNERSHIPS WITH

PROGRAMS TO BUILD GREEN HOUSING

IMPROVEMENT FOR

DIPLOMAS AND POST

COMPLETION OF A

POST SECONDARY

CREDENTIAL,TO

**ENGAGEMENT IN** SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO DEVELOP

PARTNERSHIPS WITH

RECONSTRUCTION

COMMUNITY, TRAIN

STUDENTS IN GREEN CONSTRUCTION TECHNIQUES TO PROVIDE GRANTS TO PROGRAMS PARTICIPATING IN

PROGRAM, SCHOOL IMPROVEMENT FOR

DIPLOMAS AND POST

COMPLETION OF A

POST SECONDARY

HEALTHCARE, GREEN CAREER PATHWAYS

COSTS, TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME

TO CREATE A SOLID

PROGRAMS, ENGAGES

RECONSTRUCTION

IMPROVEMENT FOR

DIPLOMAS AND POST

INCREASED STUDENT

INCREASED STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL.TO SUPPORT PROGRAMS

DEVELOPMENT OF

INITIATIVES,TO

CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS SCHOOL

IMPROVEMENT FOR

DIPLOMAS AND POST

INCREASED

SECONDARY ENROLLMENTS,TO

ENGAGEMENT IN

SERVICE TO THE

COMMUNITY TO

BUILD LOW-INCOME

HOUSING,TO CREATE

A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS,TO SUPPORT

HEALTHCARE, GREEN CAREER PATHWAYS

OPERATING COSTS

DIPLOMAS AND POST

SUPPORT PROGRAMS

ENROLLMENTS,TO

DEVELOPMENT OF

INITIATIVES,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME

HOUSING,TO

INITIATIVE, TO SUPPORT PROGRAMS

DEVELOPMENT OF GREEN INITIATIVES

IMPROVEMENT FOR

DIPLOMAS AND POST

COMPLETION OF A POST SECONDARY CREDENTIAL,TO CREATE A SOLID MENTORING

COMPONENT IN

YOUTHBUILD

COMMUNITY COLLEGES AND **EMPLOYERS IN THE** CONSTRUCTION AND

HEALTHCARE FIELDS TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME

HOUSING

DEVELOP

PROGRAMS TO

PARTNERSHIPS WITH

PURSUING

SCHOOL

INCREASED

SECONDARY ENROLLMENTS, INCREASED STUDENT

PROVIDE OPERATING

SUPPORT FOR GREEN

AND OTHER

TO SUPPORT **ENGAGEMENT IN** SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING, SCHOOL IMPROVEMENT FOR

INCREASED

SECONDARY

PURSUING

GREEN

SUPPORT

COMPLETION OF A

POST SECONDARY

CREDENTIAL,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME

HOUSING

GREEN

COMMUNITY, TO

CREDENTIAL,TO

COMMUNITY COLLEGES AND **EMPLOYERS IN THE** CONSTRUCTION AND HEALTHCARE FIELDS ENGAGES YOUTH IN

THE

OFTHEIR

THEIDA

INCREASED

SECONDARY ENROLLMENTS INCREASED

STUDENT

SUPPORT

AND OTHER OPERATING

HOUSING

MENTORING COMPONENT IN YOUTHBUILD

YOUTH IN THE

OFTHEIR

SUPPORT **ENGAGEMENT IN** SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME

> HOUSING SCHOOL

INCREASED

SECONDARY ENROLLMENTS,

AND OTHER

SCHOOL

INCREASED

SECONDARY ENROLLMENTS, INCREASED STUDENT

DEVELOP

COMMUNITY

HEALTHCARE FIELDS TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO SUPPORT YOUTHBUILD

SCHOOL

INCREASED

SECONDARY ENROLLMENTS,TO PROVIDE OPERATING SUPPORT FOR GREEN NITIATIVE,INCREASED

STUDENT

SUPPORT

COLLEGES AND **EMPLOYERS IN THE** CONSTRUCTION AND

DIPLOMAS AND POST

SCHOOL

INCREASED

SECONDARY ENROLLMENTS, INCREASED STUDENT

or assistance

(a) Name and address of organization	r <b>t II, Grants ar</b> ( <b>b)</b> EIN	(c) IRC Code section	ce to Governmer (d) A mount of cash grant	nts and Organizat (e) Amount of non- cash	tions in the Unite (f) Method of valuation	d States  (g) Description of non-cash assistance	(h) Purpose of grant or assistance
or government		ıf applıcable		assistance	(book, FMV, appraisal, other)		TO PROVIDE GRANTS
							TO PROGRAMS PARTICIPATING IN THE IDA PROGRAM,TO
LA CAUSA YOUTHBUILD							SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO
PO BOX 15868 LOS ANGELES, CA 90015	32-0150097	501(C)(3)	246,575				BUILD LOW-INCOME HOUSING,TO CREATE A SOLID MENTORING COMPONENT IN
							YOUTHBUILD PROGRAMS,TO SUPPORT HEALTHCARE, GREEN
							CAREER PATHWAYS AND OTHER OPERATING COSTS' SCHOOL
							IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY
PROJECT STEP-UP5021							ENROLLMENTS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO
LENNOX BOULEVARD LENNOX,CA 90304	95-3512392	501(C)(3)	244,881				BUILD LOW-INCOME HOUSING, TO CREATE A SOLID MENTORING COMPONENT IN
							YOUTHBUILD PROGRAMS,TO SUPPORT HEALTHCARE, GREEN
							CAREER PATHWAYS AND OTHER OPERATING COSTS SCHOOL
							IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS, INCREASED
YOUTHBUILD BROCKTON							STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL,TO
60 SKINNER STREET BROCKTON, MA 02302	04-2125014	501(C)(3)	236,769				CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD
							PROGRAMS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE
							COMMUNITY TO BUILD LOW-INCOME HOUSING TO SUPPORT
							ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO
SOUTHERN APPALACHIAN LABOR SCHOOL - KINCAIDPO BOX 127 KINCAID, WV 25119	55-0620198	501(C)(3)	233,237				SUPPORT PROGRAMS PURSUING DEVELOPMENT OF GREEN
KINCAID, WV 25119							INITIATIVES,TO CREATE A SOLID MENTORING COMPONENT IN
IMPROVED SOLUTIONS							YOUTHBUILD PROGRAMS TO SUPPORT ENGAGEMENT IN
FOR URBAN SYSEMS INC 140 N KEOWEE STREET DAYTON,OH 45402	31-1355466	501(C)(3)	230,145				SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
CRISPUS ATTUCKS CDC-							SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY
YORK605 SOUTH DUKE STREET YORK,PA 17403	23-3029584	501(C)(3)	224,117				ENROLLMENTS TO SUPPORT ENGAGEMENT IN SERVICE TO THE
							COMMUNITY TO BUILD LOW-INCOME HOUSING SCHOOL
							IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY
YOUNG ADULT							ENROLLMENTS,INCREASED STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL,TO
DEVELOPMENT IN ACTION INC (KY)800 WEST CHESTNUT ROOM 119	61-1374470	501(C)(3)	223,670				SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO
LOUISVILLE,KY 40203							BUILD LOW-INCOME HOUSING,TO DEVELOP PARTNERSHIPS WITH
							COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS
LA WRENCE YOUTH COMMISSION - LA WRENCE355	04-3177142	501(C)(3)	221,850				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO
HAVERHILL STREET LAWRENCE, MA 01840			221,030				BUILD LOW-INCOME HOUSING TO SUPPORT ENGAGEMENT IN
YB BURLINGTON - BURLINGTON (KING STREET YTH CENTER)266	03-0326293	501(C)(3)	240.672				SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO
PINE STREET BURLINGTON,VT 05401			210,673				SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER
							OPERATING COSTS  TO SUPPORT ENGAGEMENT IN SERVICE TO THE
							COMMUNITY TO BUILD LOW-INCOME HOUSING, TO CREATE A SOLID MENTORING COMPONENT IN
YOUTHBUILD PROVIDENCE - PROVIDENCE66 CHAFFEE STREET	05-0467353	501(C)(3)	210,665				YOUTHBUILD PROGRAMS,TO DEVELOP PARTNERSHIPS WITH
PROVIDENCE, RI 02909							COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE
							FIELDS,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER
							OPERATING COSTS  ENGAGES YOUTH IN  THE  RECONSTRUCTION
YBGC DBA YOUTHBUILD GULF COAST769 HOWARD	27-3198260	501(C)(3)					OF THEIR COMMUNITY,TO SUPPORT HEALTHCARE, GREEN
AVENUE BILOXI,MS 39530		·- / ·- /	198,235				CAREER PATHWAYS AND OTHER OPERATING COSTS,TRAIN STUDENTS IN GREEN
							CONSTRUCTION TECHNIQUES TO SUPPORT
YOUTH ACTION PROGRAM AND HOMES INC - NEW YORK206-08 E	13-3203701	501(C)(3)					ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO
118TH STREET NEW YORK, NY 10035	.J.J2U3/UI	201(C)(3)	198,107				SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER
j l							AND OTHER OPERATING COSTS

(a) Name and address of organization or government	t II, Grants and	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash	s in the United St  (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TREE OF LIFE CDCYB GARY 30 E 6TH AVENUE GARY,IN 46402	22-3886949	501(C)(3)	168,200		Striety		TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS
YOUTH CONSERVATION CORPS221 NORTH GENESEE STREET WAUKEGAN,IL 60085	36-3993578	501(C)(3)	166,649				TO PROVIDE OPERATING SUPPORT FOR GREEN INITIATIVE, TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING, TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER
OPERATION EXCEL- YOUTHBUILD - STLOUIS93 NORTH OAKS PLAZA ST LOUIS, MO 63121	43-6003234	501(C)(3)	166,203				OPERATING COSTS  TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS
GUADALUPE ALTERNATIVE PROGRAMS - ST PAUL MN 381 E ROBIE STREET ST PAUL, MN 55107	41-0906127	501(C)(3)	163,634				IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME
YOUTHBUILD BOSTON - BOSTON504 DUDLEY STREET 2ND FLOOR BOSTON,MA 02119	04-3080098	501(C)(3)	143,411				HOUSING  TO PROVIDE GRANTS     TO PROGRAMS     PARTICIPATING IN         THE IDA         PROGRAM, TO         PROVIDE         OPERATING SUPPORT FOR GREEN         INITIATIVE, TO         CREATE A SOLID         MENTORING         COMPONENT IN         YOUTHBUILD         PROGRAMS, TO         SUPPORT HEALTHCARE, GREEN         CAREER PATHWAYS         AND OTHER         OPERATING COSTS, TO SUPPORT         ENGAGEMENT IN         SERVICE TO THE         COMMUNITY TO BUILD LO W-INCOME
DAISY RESOURCES DEV CTR NORTH CHICAGO IL 3001 N GREEN BAY RD BLDG 1 3RD FLOOR NORTH CHICAGO,IL 60064	20-0549865	501(C)(3)	141,201				HOUSING  TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE
YOUTHBUILD FRESNO - FRESNO 1805 E CALIFORNIA STREET FRESNO,CA 93706	94-1606519	501(C)(3)	133,244				FIELDS  SCHOOL  IMPROVEMENT FOR  INCREASED  DIPLOMAS AND  POST SECONDARY  ENROLLMENTS,TO  SUPPORT  ENGAGEMENT IN  SERVICE TO THE  COMMUNITY TO  BUILD LOW-INCOME  HOUSING,TO  CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD
PEOPLE ACTING IN COMM ENDEAVORYB NEW BEDFORD181 HILLMAN RD BUILDING 9 NEW BEDFORD, MA 02740	04-2777810	501(C)(3)	133,084				PROGRAMS  TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME
SBRONX OVERALL ECONOMIC DEVELOPMENT CORP - BRONX555 BERGEN AVENUE BRONX,NY 10455	13-2736022	501(C)(3)	129,670				HOUSING  TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
SAN JOSE CONSERVATION CORPS - SAN JOSE2650 SENTER ROAD SAN JOSE, CA 95111	77-0155997	501(C)(3)	124,054				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO SCUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
NORTHEAST PARENT AND CHILD SOCIETY120 EMMONS STREET SCHENECTADY, NY 12304	14-1646198	501(C)(3)	123,551				TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO SUPPORT YOUTHBUILD
YWCA OF WESTERN MA - SPRINGFIELD MA7 ORLEAMS STREET SPRINGFIELD, MA 01109	04-2103858	501(C)(3)	118,491				PROGRAMS TO BUILD GREEN HOUSING  TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS

(a) Name and address of organization or government		(c) IRC Code section if applicable		s and Organization  (e) A mount of noncash  assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLD COLONY YYOUTHBUILD FALL RIVER 72 BANK STREET FALL RIVER, MA 02720	04-2125014	501(C)(3)	111,105		othery		TO SUPPORT PROGRAMS PURSUING DEVELOPMENT OF GREEN INITIATIVES,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS
YOUTHBUILD JUST A START - CAMBRIDGE1175 CAMBRIDGE STREET CAMBRIDGE, MA 02139	23-7121174	501(C)(3)	108,222				INCREASED STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS,TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER
BALTIMORE HOUSING AUTHORITY - BALTIMORE 2701 SAINT LO DR BALTIMORE, MD 21213	52-1925614	501(C)(3)	100,693				OPERATING COSTS  SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO SUPPORT PROGRAMS PURSUING DEVELOPMENT OF GREEN INITIATIVES
YOUTHBUILD NEWARK31 CENTRAL AVENUE NEWARK,NJ 07102	75-3187358	501(C)(3)	94,854				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
COLUMBIA HEIGHTS YOUTHBUILD - LAYC - WASHINGTON3014 14TH ST NW WASHINGTON, DC 20009	20-1818541	501(C)(3)	88,352				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS,TO  SUPPORT  ENGAGEMENT IN  SERVICE TO THE  COMMUNITY TO  BUILD LOW-INCOME  HOUSING, TO  SUPPORT  HEALTHCARE, GREEN  CAREER PATHWAYS  AND OTHER  OPERATING COSTS
YOUTHBUILD PORTLAND - PORTLANDME181 BRACKETT STREET PORTLAND, ME 04102	01-0353682	501(C)(3)	87,360				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS,TO  SUPPORT  HEALTHCARE, GREEN  CAREER PATHWAYS  AND OTHER  OPERATING COSTS  TO DEVELOP
RED LAKE NATION COLLEGEPO BOX 550 REDBY, MN 56671	41-0692380	501(C)(3)	83,607				PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO
ABLE-DISABLE ADVOCACY4283 EL CAJON BOULEVARD SUITE 110 SAN DIEGO,CA 92105	95-3031682	501(C)(3)	79,226				BUILD LOW-INCOME HOUSING  TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS
LOS ANGELES CONSERVATION CORPS PO BOX 15868 LOS ANGELES, CA 90015	95-4002138	501(C)(3)	77,759				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS
NEW JERSEY COMMUNITY DEVELPMENT CORPPO BOX 6976 PATERSON,NJ 07505	22-3282526	501(C)(3)	74,860				TO PROVIDE OPERATING SUPPORT FOR GREEN INITIATIVE,TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS
PETERSBURG URBAN MINISTRIES INC - PETERSBURG VAPO BOX 708 PETERSBURG,VA 23804	54-1868900	501(C)(3)	72,931				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS,TO  SUPPORT  HEALTHCARE, GREEN  CAREER PATHWAYS  AND OTHER  OPERATING COSTS
SAN ANTONIO YOUTH CENTER1215 W POPLAR STREET PO BOX 7844 SAN ANTONIO,TX 78207	74-2333088	501(C)(3)	70,319				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS TO PROVIDE OPERATING SUPPORT FOR GREEN INITIATIVE, INCREASED STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL, TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,

Form 990,Schedule I, Par	t II, Grants and	d Other Assistance	to Governments	and Organizatio	ns in the United	States	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREVENTION PLUS INC260 FOREST PARKWAY FOREST PARK, GA 30297	58-1707609	501(C)(3)	65,528		othery		INCREASED STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL, TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS, TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME
CAPITAL CITY YOUTHBUILDD555 WINDSOR STREET HARTFORD,CT 06120	06-0795640	501(C)(3)	64,860				TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS
UNITED WAY OF LONG ISLAND819 GRAND BOULEVARD DEER PARK, NY 11729	11-6042392	501(C)(3)	64,860				TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS
ABYSSINIAN DEVELOPMENT CORPORATION4 WEST 125TH ST NEW YORK, NY 10027	13-3552154	501(C)(3)	64,860				TO SUPPORT HEALTHCARE, GREEN CAREER PATHWAYS AND OTHER OPERATING COSTS
COMMUN SVCSCONSORTIUM - ALBANY380 MARKET STREET LEBANON,OR 97355	93-6118438	GOVERNMENT (COMMUNIT	60,336				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING, TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS
HAZARD COMMUNITY COLLEGE (HAZARD KY) 1110 MAIN STREET JACKSON,KY 41339	61-1374470	501(C)(3)	49,021				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LO W-INCOME HOUSING, COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE
ISLES YOUTHBUILD - TRENTON33 TUCKER STREET TRENTON,NJ 08618	22-2350832	501(C)(3)	47,603				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO PROVIDE OPERATING SUPPORT FOR GREEN INITIATIVE,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD
YOUTHBUILD BROWNSVILLE - BROWNSVILLE815 ARTHUR STREET BROWNSVILLE,TX 78521	74-1835777	501(C)(3)	42,929				PROGRAMS  TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
AKRON SUMMIT COMMUNITY ACTION (AKRON OH)230 WEST CENTER STREET AKRON,OH 44308	34-0965339	501(C)(3)	39,139				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,TO SUPPORT YOUTHBUILD PROGRAMS TO BUILD GREEN HOUSING
YWCA - POUGHKEEPSIE NY 248 MAIN STREET POUGHKEEPSIE, NY 12601	14-1777760	501(C)(3)	35,728				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS,TO  SUPPORT  ENGAGEMENT IN  SERVICE TO THE  COMMUNITY TO  BUILD LOW-INCOME  HOUSING
YOUTHBUILD SANTA ROSA - SANTA ROSA2230 LOMITAS AVENUE SANTA ROSA,CA 95401	94-1648949	501(C)(3)	35,650				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LO W-INCOME HOUSING
QUEST RECOVERY SYSTEMS INC - CANTON OH1731 GRACE AVENUE NE CANTON,OH 44703	34-1912951	501(C)(3)	32,675				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS

Form 990,Schedule I, Par	t II, Grants and	d Other Assistance	to Governments	and Organization	s in the United St	ates	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE CENTER INC1900 LAFAYETTE STREET SUITE 2 GRETNA, LA 70053	72-1472498	501(C)(3)	31,636				TO START A YOUTHBUILD PROGRAM,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
YOUTHBUILD LOWELL - LOWELL391 PAWTUCKET STREET LOWELL, MA 01854	04-2382027	501(C)(3)	30,677				TO SUPPORT PROGRAMS PURSUING DEVELOPMENT OF GREEN INITIATIVES,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS, TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE IN THE CONSTRUCTION AND HEALTHCARE FIELDS
MASSACHUSETTS JOB TRAINING INC2 FOSTER STREET 3RD FLOOR WORCESTER, MA 01608	04-2652922	501(C)(3)	30,000				TO SUPPORT YOUTHBUILD PROGRAMS TO BUILD GREEN HOUSING,
EAGLE RIDGE INSTITUTE 3301 SW 17TH STREET OKLAHOMA CITY,OK 73108	73-1250829	501(C)(3)	29,966				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS,TO  SUPPORT  ENGAGEMENT IN  SERVICE TO THE  COMMUNITY TO  BUILD LOW-INCOME  HOUSING
LANCASTER COUNTY SCHOOL DISTRICT1240 CHILDRENS AVENUE LANCASTER,SC 29720	57-1106216	501(C)(3)	29,772				COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING,
BI-COUNTY COMMUNITY ACTION PROGRAMS INC - BEMIDJIPO BOX 579 BEMIDJI,MN 56601	41-0885981	501(C)(3)	29,178				COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE, SHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS
COLUMBUS WORKS376 E MAIN STREET COLUMBUS,OH 43232	31-1399503	501(C)(3)	27,645				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
MILE HIGH YOUTH CORPS 1801 FEDERAL BOULEVARD DENVER,CO 80204	84-1182631	501(C)(3)	24,646				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
ALAMEDA HEIGHTS OUTREACH FOUNDATION 2721 LOYOLA STREET DALLAS,TX 75241	75-2227185	501(C)(3)	24,100				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS,TO  SUPPORT  ENGAGEMENT IN  SERVICE TO THE  COMMUNITY TO  BUILD LOW-INCOME  HOUSING
LA TECH COLLEGE - BOGALUSA LA1242 AUSTIN STREET BOGALUSA,LA 70427	72-1470584	GOVERNMENT - LOUISIA	23,720				COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS
RESOURCES FOR HUMAN DEVELPMENTYB CHESTER1 E 9TH STREET CHESTER, PA 19016	23-1727133	501(C)(3)	23,633				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS,TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD
RIVER CITY COMMUNITY DEVELOPMENT CORPORATION501 EAST MAIN ST ELIZABETH CITY, NC 27909	56-1709321	501(C)(3)	22,246				PROGRAMS  TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS

Form 990,Schedule I, Part	t II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United St	ates	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTELOPE VALLEY YOUTHBUILD39360-B SUMMERWIND DRIV PALMDALE, CA 93551	91-0852709	501(C)(3)	20,833				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS
HOME SWEET HOME YOUTH SERVICES1851 W 54TH STREET LOS ANGELES, CA 90056	01-0782731	. 501(C)(3)	20,271				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS
SAN JOAQUIN COUNTY OFFICE OF EDUCATION 2707 TRANSWORLD STOCKTON,CA 95206	68-0342748	501(C)(3)	20,250				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
YOUTHBUILD CHARTER SCHOOL OF CALIFORNIA 155 W WASHINGTON BOULEVARD SUITE 517 LOS ANGELES, CA 90015	26-2018580	501(C)(3)	19,500				INCREASED STUDENT COMPLETION OF A POST SECONDARY CREDENTIAL,TO DEVELOP PARTNERSHIPS WITH COMMUNITY COLLEGES AND EMPLOYERS IN THE CONSTRUCTION AND HEALTHCARE FIELDS
DEPARTMENT OF YOUTH & RECREATION SERVICES 175 CENTRAL AVENUE ALBANY,NY 12206	14-6002058	501(C)(3)	19,276				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
SAN GABRIEL VALLEY CONSERVATION CORPS YOUTHBUILD3017 NORTH TYLER AVENUE EL MONTE, CA 91731	27-0030016	5 501(C)(3)	18,266				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
MAAC PROJECT YOUTHBUILD - NATIONAL CITY1385 THIRD AVENUE CHULA VISTA,CA 91911	95-2457354	501(C)(3)	18,003				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS
THE JOB COUNCILROUGE VALLEY YOUTHBUILD673 MARKET STREET MEDFORD,OR 97504	93-1040461	. 501(C)(3)	16,413				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
SO SUMTER RESOURCE CTR - SUMTER SC337 MANNING AVENUE SUMTER, SC 29150	59-6000405	5 501(C)(3)	16,243				TO PROVIDE GRANTS TO PROGRAMS PARTICIPATING IN THE IDA PROGRAM, TO CREATE A SOLID MENTORING COMPONENT IN YOUTHBUILD PROGRAMS, TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
PORTABLE PRACTICAL EDUCATION PREPARATION201 N BINGHAM SUITE 6 SOMERTON, AZ 85350	23-7232227	, 501(C)(3)	15,965				COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE,TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME
CHADRON COMMUNITY DEVELOPMENT CORP130 EST 2ND STREET CHADRON,NE 69337	47-0784065	5 501(C)(3)	15,000				COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE
HALE EMPO WERMENT AND REVITALIZATION1120 MAIN STREET GREENSBORO,AL 36744	63-1127351	501(C)(3)	15,000				COMMUNITY ECONOMIC DEVELOPMENT REBUILDING CAREER PATHWAYS FOR RURAL YOUNG PEOPLE

## 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) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLOUD AND FIRE MINISTRIESPO BOX 2636 NORTH HILLS,CA 91393	88-0564057	501(C)(3)	12,907				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
HEART OF OREGON CORPS PO BOX 279 BEND,OR 97709	93-1303879	501(C)(3)	12,886				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
YOUTHBUILD HELPING HANDS3738 PARIS AVENUE NEW ORLEANS, LA 70122	72-0405911	501(C)(3)	10,622				TO START A YOUTHBUILD PROGRAM
MASSACHUSETTS COALITION CO YOUTHBUILD BOSTON60 SKINNER STREET BROCKTON, MA 02302	04-2125014	501(C)(3)	10,186				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS
MICHIGAN WORKS499 W MAIN STREET BENTON HARBOR, MI 49022	38-3287818	501(C)(3)	8,530				TO SUPPORT ENGAGEMENT IN SERVICE TO THE COMMUNITY TO BUILD LOW-INCOME HOUSING
VINTON COUNTY COMM & SOJORNERS NETWORK (MCARTHUR OH)605 WEST MAIN STREET MCARTHUR,OH 45651	34-1880636	501(C)(3)	8,333				SCHOOL IMPROVEMENT FOR INCREASED DIPLOMAS AND POST SECONDARY ENROLLMENTS
UNITED METHODIST CHILDRENS HOME1707 VETERANS MEMORIAL DRIVE MOUNT VERNON,IL 62864	37-1355748	501(C)(3)	8,303				TO CREATE A SOLID  MENTORING  COMPONENT IN  YOUTHBUILD  PROGRAMS

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DLN: 93493319068831

OMB No 1545-0047

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# **Schedule J**

(Form 990)

Department of the Treasury Internal Revenue Service

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 YOUTHBUILD USA INC AND AFFILIATE **Employer identification number** 

22-3076454

Pa	Questions Regarding Compensatio	n			
				Yes	Νο
1a		ovided any of the following to or for a person listed in Form I to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement orprovision of all the expenses desc	rganızatıon follow a wrıtten policy regardıng payment or rıbed above? If "No," complete Part III to explaın	1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all t	·			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	payment from the organization or a related organization?	4a		Νo
ь	Participate in, or receive payment from, a suppleme	ntal nonqualified retirement plan?	4b		Νο
С	Participate in, or receive payment from, an equity-b	pased compensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and pi	rovide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ust complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	, line 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	, line 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
Ь	Any related organization?		6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"		7		Νο
8	Were any amounts reported in Form 990, Part VII,				
	subject to the initial contract exception described i	n Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebuttable presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported 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>(B)</b> Breakdown of	W-2 and/or 1099-MI		(C) Retirement and other deferred	( <b>D)</b> Nontaxable benefits	<b>(E)</b> Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Dellellis	(6)(1)-(0)	Form 990 or Form 990-EZ
	(I) (II)	132,851 0	0		I -		151,495 0	136,443 0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								

Schedule J (Form 990) 2010 Page **3** 

#### 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

Schedule J (Form 990) 2010

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As Filed Data -

DLN: 93493319068831

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#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. 2010

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Name of the organization YOUTHBUILD USA INC AND AFFILIATE										ntion numbe	er
Part I Excess Benefit Trai	ncact	ions (c	oction 501	(c)(3)	and soction 501	(c)(4)		2-30764			
Complete if the organizat										ıne 40b	
1 (a) Name of disq									•		orrected?
1 (a) Name of alsq		person			<b>(b)</b> Desc	ription	oi trans	action		Yes	No
2 Enter the amount of tax impos	ed on t	he orgai		agers o				_	r • #		
3 Enter the amount of tax, If any	, on lin	e 2, abo							*		
Part II Loans to and/or l											
Complete if the organiz	zation a T	ans we re	d "Yes" on F 	orm 990	D, Part IV, line 26	, or Fori	m 990-	EZ, Part V (f)		a	
(-) N		oan to om the	/-\0			(e) ː	[ n	Appro		(g)Writt	en
(a) Name of interested person and purpose		ization?	(c)Original a		(d)Balance due	defau	lt?	by boar		agreeme	nt?
F F	To	From	-			Yes	l Na	commit Yes	1	Yes	No
	+ 10	From				res	No	res	No	res	NO
	+										
	<u> </u>										
Total				<b>▶</b> \$							
Part III Grants or Assistar Complete if the orga	anızatı	on ansv	wered "Yes	" on Fo	rm 990, Part IV		27.				
(a) Name of interested pers	on	(			een interested pei ganization	rson	<b>(c)</b> A r	nount of g	rant or t	ype of assis	tance
						+					
						1					

#### **Part IV** Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	n answered Yes on	FORM 990, Part IV, III	ie 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organız rever	nues?
	organization			Yes	No
	JOHN BELL IS MARRIED TO DOROTHY STONEMAN, PRESIDENT OF YOUTHBUILD USA, INC	·	JOHN BELL IS EMPLOYED BY THE ORGANIZATION AS THE VICE PRESIDENT FOR LEADERSHIP DEVELOPMENT AND THE ACADEMY FOR TRANSFORMATION		N o
HÓMES INC	DOROTHY STONEMAN IS THE PRESIDENT OF YOUTHBUILD USA, INC	·	YOUTHBUILD USA, INC MADE GRANT PAYMENTS TO YOUTH ACTION PROGRAM, INC DOROTHY STONEMAN IS THE CHAIR OF THE BOARD OF DIRECTORS OF YOUTH ACTION PROGRAM, INC		No

#### Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation
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Schedule L (Form 990 or 990-EZ) 2010

#### **SCHEDULE M** (Form 990)

## **NonCash Contributions**

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Name of the organization YOUTHBUILD USA INC AND AFFILIATE **Employer identification number** 22-3076454

Pa	rt I Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of determining of amounts		ontribut	on
1	Art—Works of art			19				
	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
good	s							
	Cars and other vehicles .							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	X	1	10,406	FMV ON DATE OF	DONA	TION	
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts .							
	O ther ► ()		See Add'l Data					
	Other ►()							
	O ther ►()							
	Other ► ()							
29	Number of Forms 8283 received by for which the organization complete	_	<del>-</del> ,		29	ı	I	
30a	During the year, did the organization						Yes	No
	must hold for at least three years f			on, and which is not require	d to be used			
	for exempt purposes for the entire	holding p	erıod?			30a		No
	If "Yes," describe the arrangement							
31	Does the organization have a gift a	cceptanc	e policy that requires the r	eview of any non-standard	contributions?	31		N o
32a	Does the organization hire or use the contributions?	hırd partı	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
ь 33	If "Yes," describe in Part II If the organization did not report re describe in Part II	venues II	n column (c) for a type of p	roperty for which column (a	) is checked,			

Page 2

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 22-3076454

Name: YOUTHBUILD USA INC AND AFFILIATE

#### Form 990 Schedule M, Part I - Types of Property

Property Type	(a) Check if applicable	<b>(b)</b> Number of Contributions or items contributed		(d) Method of determining oncash contribution amounts
BATH,SPA & BEAUTY Other ► (PRODUCTS )		•	6.657	DONORG WRITTEN STATEMENT
Other ► (FRODUCTS ) Other ► (FLASHLIGHTS)	X	1	,	DONORS WRITTEN STATEMENT DONORS WRITTEN STATEMENT
COMPUTER Other►(SOFTWARE)	х	2	,	DONORS WRITTEN STATEMENT
Other ► (TOYS)	Х	1	350	DONORS WRITTEN STATEMENT
CHILDREN'S Other ▶ ( <u>JEWELRY</u> )	X	1	400	DONORS WRITTEN STATEMENT

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DLN: 93493319068831

OMB No 1545-0047

2010

(Form 990 or 990-EZ)

Department of the Treasury

Complete to provide information for responses to specific questions on

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

▶ Attach to Form 990 or 990-EZ.

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Name of the organization YOUTHBUILD USA INC AND AFFILIATE

**SCHEDULE 0** 

Internal Revenue Service

Employer identification number

22-3076454

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		DOROTHY STONEMAN, PRESIDENT, AND JOHN BELL, VP OF LEADERSHIP DEVELOPMENT & THE ACADEMY, ARE MARRIED

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE SENIOR FINANCE DIRECTOR AND CORPORATE CONTROLLER, THE CHIEF FINANCIAL OFFICER, THE PRESIDENT AND THE AUDIT COMMITTEE REVIEW THE FORM 990 IT IS ALSO PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO FILING

Identifie	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE CFO DISTRIBUTES A QUESTIONNAIRE TO ALL OFFICERS, DIRECTORS AND SENIOR MANAGERS AND COLLECTS THEM AT THE DECEMBER BOARD MEETING SHE FOLLOWS UP WITH ANY ONE WHO MAY NOT HAVE ATTENDED THE MEETING SHE REVIEWS THE RESPONSES AND FOLLOWS UP AS APPROPRIATE BASED UPON THE RESPONSES

ldentifier	Return Reference	Explanation										
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS DETERMINES COMPENSATION OF THE PRESIDENT FOR YOUTHBUILD USA, INC. FOR OTHER OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION, SUPERVISORS PREPARE PERFORMANCE EVALUATIONS AND MAKE RECOMMENDATIONS THAT ARE REVIEWED BY THE SR. DIRECTOR OF HR AND CFO, WHO REVIEW THE RECOMMENDATIONS TO ENSURE EQUITY AND STANDARDIZATION ACROSS THE ORGANIZATION AND MAKE RECOMMENDED ADJUSTMENTS WHEN NECESSARY DECISIONS INCLUDE A COMPARISON OF SALARIES TO MARKET THE PRESIDENT IN CONSULTATION WITH THE SR. DIRECTOR OF HR MAKES FINAL DECISIONS REGARDING COMPENSATION OF THE EXECUTIVE MANAGEMENT TEAM										

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 550,970 CHANGE IN VALUE OF ASSETS HELD IN TRUST 2,429 LOSS ON DISPOSAL OF ASSETS -4,500 TOTAL TO FORM 990, PART XI, LINE 5 548,899

Identifier	Return Reference	Explanation
		YOUTHBUILD UTILIZES ITS BOARD OF DIRECTORS TO OVERSEE THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECT ITS INDEPENDENT ACCOUNTANT

DLN: 93493319068831

2010

OMB No 1545-0047

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# SCHEDULE R (Form 990)

Name of the organization YOUTHBUILD USA INC AND AFFILIATE Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

16-1668947

Employer identification number

						22 0070101			
Part I Identification of Disregarded Entities (Co	omplete if the organiz	ation ar	nswered "	Yes" on	Form 990, Part	IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activ	ity	(c) Legal domic or foreign o	ıle (state	<b>(d)</b> Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity	ı	
(1) YOUTHBUILD REBUILDING COMPANY OF MISSISSIPPI LLC 58 DAY STREET SOMERVILLE, MA 02144 20-4933242	TO ENABLE YOUTHI PARTICIPANTS TO NATIONAL SERVICE REBUILDING	PROVIDE	MS		C		O YOUTHBUILD USA INC		
Part II Identification of Related Tax-Exempt Orgon or more related tax-exempt organizations during		ete if the	e organiza	ation ans	swered "Yes" o	n Form 990, Part	IV, line 34 because	e it had	one
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal don	( <b>c)</b> nıcıle (state n country)	Exemp	( <b>d)</b> It Code section	(e) Public charity status (if section 501(c) (3))	<b>(f)</b> Direct controlling entity	Section 51 contr organi	12(b)(1 rolled
								Yes	No
(1) YOUTHBUILD LOAN FUND INC	MAKES LOANS TO								
58 DAY STREET	AFFILIATED YOUTHBUILD NONPROFIT OR	1	MA	PRIVATE F	OUNDATION	PF	YOUTHBUILD USA INC		No
SOMERVILLE, MA 02144	INONPROFIT OR								

<b>(a)</b> ame, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) end-of-year sssets	(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	<b>(j</b> Gener mana partr	al or ging	<b>(k)</b> Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	zation	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	Direct cor	(d) Direct controlling entity  (C corp, S or trust)		corp,	corp,		(g) Share of end-of-year assets			<b>(h)</b> Percentage ownership

(3)

(4)

(5)

(6)

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Part V Transactions With Related Organizations (Complete if the organization answered "	es" on Form 990, Pa	rt IV, line 34, 35, 3	35A, or 36.)		
<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III or IV				Y	es No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related org	janizations listed in Part	s II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1	3	No
<b>b</b> Gift, grant, or capital contribution to other organization(s)			1	b	No
c Gift, grant, or capital contribution from other organization(s)			10		No
<b>d</b> Loans or loan guarantees to or for other organization(s)			10	3	No
e Loans or loan guarantees by other organization(s)			1	•	No
f Sale of assets to other organization(s)			11	-	No
g Purchase of assets from other organization(s)			10	<b>,</b>	No
h Exchange of assets			1	h	No
i Lease of facilities, equipment, or other assets to other organization(s)			1	i	No
j Lease of facilities, equipment, or other assets from other organization(s)			1	i	No
k Performance of services or membership or fundraising solicitations for other organization(s)			1	k Y	es
I Performance of services or membership or fundraising solicitations by other organization(s)			1		No
m Sharing of facilities, equipment, mailing lists, or other assets			1	m	No
n Sharing of paid employees			1	n	No
• Reimbursement paid to other organization for expenses			10	>	No
<b>p</b> Reimbursement paid by other organization for expenses			1	Р	No
<b>q</b> Other transfer of cash or property to other organization(s)			10	+	No
r Other transfer of cash or property from other organization(s)			1		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 relat	nonships and transact	tion thresholds		
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of detern involv	nınıng	amount
1) YOUTHBUILD LOAN FUND INC	К	18,750	MUTUALLY AGREED	JPON	FEE

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		<b>(e)</b> Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) eral or naging rtner?	
			Yes	No		Yes	Yes No		Yes	N	
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## Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier I Return Reference I	er Return Reference Explanation
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