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UNITY 02/29/2012 3 33 PM

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_ Open to Public Inspection

A	For the 2010 ca	lendar year, or tax year beginning $07/01/10$, and ending $06/30/11$		_	
В	Check if applicable	C Name of organization United National Indian Tribal Youth		D Emplo	oyer identification number
	Address change	Tribal Youth, Inc.			
	Name change	Doing Business As UNITY, Inc.		73-	1010390
٢٦	Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite		none number
П	Terminated	500 N. BROADWAY #10		405	5-236-2800
		City or town, state or country, and ZIP + 4 OKLAHOMA CITY OK 73102		 	E40 0E0
	Amended return		T	G Gross rece	
	Application pending	F Name and address of principal officer J.R. Cook	H(a) Is this a g	roup return for a	affiliates? Yes X No
		P.O. Box 800	H(b) Are all a	iffiliates includ	ded? Yes No
		Oklahoma City OK 73101	If "N	o," attach a li	st (see instructions)
1	Tax-exempt state		1		
J	Website: ▶ ¹	www.unityinc.org	H(c) Group e	xemption nur	mber >
K	Form of organization	X Corporation Trust Association Other L Y	ear of formation		M State of legal domicile
_ F	art I S	ummary			
~.	1 Briefly d	escribe the organization's mission or most significant activities.			
200	То	foster the spirtual, mental, physical, and social devel			
an Z	Ind	ian and Alaskan Native youth and to help build a stron	-	ed, and	
VED MAR 2 8 2012 Activities & Governance	sel	f-reliant Native America through greater youth involve			
2.0	2 Check t	nis box if the organization discontinued its operations or disposed of more than 25%	of its net asset	1 1	9
₹ 8	3 Number	of voting members of the governing body (Part VI, line 1a)		3	9
ities	4 Number	of independent voting members of the governing body (Part VI, line 1b)		5	_
급흫	6 Total nu	mber of individuals employed in calendar year 2010 (Part V, line 2a) mber of volunteers (estimate if necessary)		6	
ZZ À		related business revenue from Part VIII, column (C), line 12		7a	
SCANNED Activiti		elated business taxable income from Form 990-T, line 34		7b	0
ပ္က —		_	Prior Ye		Current Year
-	8 Contribu	itions and grants (Part VIII, line 1h)	61	0,972	538,478
eun	_	service revenue (Part VIII, line 2g)			
Revenue	10 Investm	ent income (Part VIII, cotumit (A); lines 3, 4, and 7d)		7,371	1,397
-		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,963	175
		venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	54	8,306	540,050
		paid to or for members (Part IX Acolumn (A), Intel 1–3)			
	4		403,294		438,263
sesued	16a Professi	, other compensation, employee benefits (Part IX, column (A), lines 5–10) onal fundraising fees (Part IX, column (A), line 11e)		3,232	100,100
beu		ndraising expenses (Part IX, column (D), line 25) ▶			
Ē		penses (Part IX, column (A), lines 11a–11d, 11f–24f)	45	5,043	416,644
		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)	85	8,337	854,907
		e less expenses Subtract line 18 from line 12		0,031	-314,857
Net Assets or	8	-	Beginning of Cu		End of Year
Sset	20 Total as	sets (Part X, line 16)		1,654	521,173
et A	21 Total lia	bilities (Part X, line 26)		2,711 8,943	27,085 494,088
_		ets or fund balances Subtract line 21 from line 20 granture Block	- 00	0,943	494,000
		perjury, I declare that I have examined this return, including accompanying schedules and statements, and	to the best of m	v knowledge	and helief it is
	•	omplete Declaration of preparer (other than officer) is based on all information of which preparer has any		y Kilowiedge	and belief, it is
-					
Sig	an 🔽	Signature of officer		Date	3/00/12
He	- .	J.R. Cook President	dent & E	xecut	ive Director
		Type or print name and title			
	I .	ype preparer's name Preparer's signature	Date	Check	if PTIN
Pai	nacua	n L. Williams Autumn L. Williams luturelle	02/29	/12 self-en	nployed P01275073
	parer Firm's			Firm's EIN	73-1349920
Us	e Only	2812 NW 57th St Ste 102			405 605 0540
		oddress Noklahoma City, OK 73112-7064	!	Phone no	405-607-8743
	<u> </u>	ss this return with the preparer shown above? (see instructions)			Yes No
DA/		eduction Act Notice, see the separate instructions.			Form 990 (2010)

orm 990 (2010)	United Nation	al Indian Tribal Youth	73-1010390	Page 2
		Service Accomplishments	a thia Dart III	
	The ck if Schedule O c	ontains a response to any question in	n this Part III	
To fost	er the spirtua	l, mental, physical, and	social development	of American
Indian	and Alaskan Na	tive youth and to help	build a strong, unif	ied, and
self-re	liant Native A	merica through greater	youth involvement.	
2 Did the orga	nization undertake anv sign	ificant program services during the year which w	vere not listed on the	
=	990 or 990-EZ?			Yes X No
If "Yes," des	scribe these new services or	Schedule O		
-	inization cease conducting,	or make significant changes in how it conducts,	any program	□ v ∀ v.
services?	scribe these changes on Sch			Yes X No
		ents for each of the organization's three largest	program services by expenses. Section	
		nd section 4947(a)(1) trusts are required to repo)
others, the t	otal expenses, and revenue	, if any, for each program service reported		
4a (Code) (Expenses \$	790,518 including grants of \$) (Revenue \$	
UNITY,		educational and trainin		rences.
		onferences are the main		
to acco	mplish its mis	ssion.		
				•
Ab (Codo	\/Evpansos_\$	including grants of \$) (Revenue \$	
4b (Code.) (Expenses \$	including grants or \$) (Nevenue 🏺	,
			•	
			•	
An (Codo) /Evanpace \$	including grants of \$) (Revenue \$	
4c (Code)(Expenses \$	including grants of \$) (Nevenue \$. ,
			•	
			•	
				•
			•	
44.00		ahadula O)		
4d Other progr (Expenses	am services. (Describe in S \$	chedule O.) Including grants of \$) (Revenue \$)
	ram service expenses ▶	790,518	7 (1.0.0.000 W	
DAA				Form 990 (2010)

	n 990 (2010) United National Indian Tribal Youth 73-1010390 art IV Checklist of Required Schedules			age 3
			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_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			l
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	<u> </u>	X
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	 	X
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 I	6	-	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_ <u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			x
	complete Schedule D, Part III	8		┢┸
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,"	9		x
40	complete Schedule D, Part IV	•	-	 **
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-	10	1	x
11	endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
11	VII, VIII, IX, or X as applicable.			•
а		İ	Ì	f
а	complete Schedule D, Part VI	11a	x	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1.00	 	
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116		x
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		x
Ь	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	х	
е	The state of the s	11e		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
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	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u>. </u>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	X
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_	├	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		1	-
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18_	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	45	1	
	If "Yes," complete Schedule G, Part III	19	1	X

20a

20b

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

	Oncomist of Required Octionalies (Continued)					
04	Dulib and a second a second and				Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			24		x
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		ŀ	21		
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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		.	-22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated				1	
	employees? If "Yes," complete Schedule J			23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than					
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b					
	through 24d and complete Schedule K. If "No," go to line 25			24a		x
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		Ì			
	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		X
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		X
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		X
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		X
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 IV			28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					
	Schedule L, Part IV			28b	_	X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	•		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					.
	conservation contributions? If "Yes," complete Schedule M			30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					x
	Part I			31	_	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			32		x
22	complete Schedule N, Part II			32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			33_		 -
J-4	IV, and V, line 1			34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		x
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	Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable					
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,					l
	Part VI			37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and					
	19? Note. All Form 990 filers are required to complete Schedule O			38	X	

Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes Nο 10 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and X reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b 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 X account)? 4a If "Yes," enter the name of the foreign country: 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 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c 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 X 6a 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 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a and services provided to the payor? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? a 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 8 organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? 9b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9			[[
b	Enter the number of voting members included in line 1a, above, who are independent	1b	9			Ė
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					į
	any other officer, director, trustee, or key employee?			2_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					1
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					1
	of the governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					į
	the year by the following:					Ė
а	The governing body?			8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					1
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
ec.	tion B. Policies (This Section B requests information about policies not required by the In	<u>ternal</u>	Reven	<u>ue Code.</u>		
					Yes	No
0a	Does the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such					
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?			10b		<u> </u>
1a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the					
	form?			11a	Х	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					ļ
2a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
	rise to conflicts?			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this is done			12c	_	
3	Does the organization have a written whistleblower policy?			13		X
4	Does the organization have a written document retention and destruction policy?			14		X
5	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		X
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				1	
	with a taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its					i
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the				1	
	organization's exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed ▶ OK					
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	ly) avaı	lable			
	for public inspection Indicate how you make these available Check all that apply					

	Sec	tion	C. E)isc	ios	ure
--	-----	------	------	------	-----	-----

17	List the states with which a copy of this Form 990 is required to be filed	▶ 0
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- - Own website Another's website X Upon request
 - 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
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the Pat Hunter P.O. Box 800 organization >

Oklahoma City

OK 73101

DAA

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 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 orgai (A) Name and Title	(B) Average			((C)	hat a		(D) Reportable	(E) Reportable	(F) Estimated
-	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director				Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) J.R. Cook								77.670		
Executive Di	40.00	X		X		-		57,672	0	0
(2) Loretta Tuell				۱.,						0
Chairwoman	2.00	X		X				0	0	
(3) Mel Pervais	2 00	<u>.</u>							o	0
ViceChair (4) Jan English	2.00	X		X		├		0		
• • •	2.00	x		x				o	0	0
Treasurer (5) Greg Mendoza	2.00	╀		^		 		<u> </u>		
Secretary	2.00	x		x				o	0	0
(6) Mary Kim Titla	2.00	╇	\vdash	^		 				
Trustee	2.00	x				l	Ì	o	0	0
(7) Dr. Darrell Meas		† 				t				
Trustee	2.00	x						l o	0	0
(8) J'Shon Lee		†		-						
Trustee	2.00	x	ļ					0	0	0
(9) Victor Fuentes										
Trustee	2.00	x						_ 0	0	0
(10)										
(11)										
(12)										-
(13)										<u> </u>
(14)	-									
(15)		-	ļ <u>.</u>						-	
(16)										

UNITY 02/29/2012						
Form 990 (2010)	United	National	Indian	Tribal	Youth	73-1010390
Part VIII	Section A. Off	cers. Directors. T	rustees. Kev	Emplovees. a	nd Highest	Compensated Employees

Pa	rt VII Section A. Officers	, Directors, Trus	tees	, Ke	y En	nplo	yees	, an	d Highest Compensated E	mployees (continued)				
	(A) Name and Title	(B) Average	Pos	ition (chec	C) k all t	hat a		(D) Reportable compensation	(E) Reportable compensation from		(F) Estima amoun		
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations			
(17)														
(18)														
(19)		<u> </u>												
(20)		 												_
(21)										-				
(22)		<u> </u>						_					_	
(23)		<u> </u>					-						_	
(24)			┝		-	<u> </u>	-							
			<u> </u>				_							
(25)									<u> </u>		<u> </u>			
(26)														
(27)														
(28)														
1b	Sub-total							•	57,672		-			
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectio	n A				>	57,672					
2	Total number of individuals (increportable compensation from				ose	liste	d abo	ove)	who received more than \$1	00,000 in				
-	reportable compensation from	the organization		<u> </u>		_							Yes	No
3	Did the organization list any fo employee on line 1a? If "Yes,"								ee, or highest compensated			3		x
4	For any individual listed on line organization and related organ	1a, is the sum o	f rep	ortat	ole c	omp	ensa	tion	and other compensation fro mplete Schedule J for such	m the				
5	individual Did any person listed on line 1.									dıvıdual	L	4		X
	for services rendered to the or	ganızatıon? If "Ye	es," c	omp	lete	Sche	edule	J fo	or such person			5	_	Х
_ <u>Sec</u>	Complete this table for your five	e highest compe	nsate	ed in	depe	nde	nt co	ntra	ctors that received more tha	ın \$100,000 of				
	compensation from the organiz	(A) I business address							Descrip	(B) otion of services		Cc	(C) mpensa	ition
		<u>,</u>					_							
			_									-		
								<u> </u>						
								-						
_	Total number of independent	pontractors (inclin	dina '	hut =	of li-	nitos	1 10 11	1000	a listed above) who					
2	Total number of independent or received more than \$100,000	•	_						s listed above) willo	0				

				(A) Total revenue	(B) Related or	(C)	(D) Revenue
				Total revenue	exempt function revenue	Unrelated business revenue	excluded from tax under sections 512, 513, or 514
SS 1a Fe	ederated campaigns	1a			revenue		312, 313, 01 314
o Me	lembership dues	1b					
6 C FI	undraising events	1c					
sign d Re	elated organizations	1d					
S.E. e Go	overnment grants (contributions)	1e					
f All	I other contributions, gifts, grants,						
and and	nd similar amounts not included above	1f	538,478				
a No	ı. 2-1-oncash contributions included in lines 1a						
Se h To	otal. Add lines 1a-1f	•	▶	538,478			
Program Service Revenue Contributions, gifts, grants amounts and other similar amounts amounts and other similar amounts and other similar amounts and other similar amounts amounts amount amounts and other similar amounts amounts amounts amounts amount			Busn Code				
9 2a							
å b							
.5 c						_	
Se d							
E e			<u></u>				
[함 f All	II other program service reven	ue .					
g To	otal. Add lines 2a-2f		•				<u> </u>
3 In	nvestment income (including di	vidends, interes	st,				
	nd other similar amounts)		▶	1,397	1,397		
4 Inc	ncome from investment of tax-e	exempt bond pro	oceeds 🕨				
5 Rd	loyalties		•			~~	
	(ı) Real	(II) F	Personal				
6a Gr	Gross Rents						
b Les	ess rental exps						
	ental inc or (loss)			1			
	7a Gross amount from sales of assets (ii) Securities (iii)						
oth	her than inventory						
b Les	ess cost or other						
	asis & sales exps						
	Gain or (loss)					•	
	let gain or (loss)	. [▶				
Ψı	ross income from fundraising even	ts					
[(nc	not including \$						
§ 01	f contributions reported on line 1c)						
as I	ee Part IV, line 18	a					
5 B Le	ess. direct expenses	b				:	
	let income or (loss) from fundra ross income from gaming activities						
	ee Part IV, line 19	l l					
	ess direct expenses	a b					
	let income or (loss) from gamir						<u> </u>
	Gross sales of inventory, less	ig activities					
	eturns and allowances	а					‡
	ess. cost of goods sold	b					
	let income or (loss) from sales		•				İ
<u> </u>	Miscellaneous Revenue	or involutory_	Busn. Code				
11a	Other Income			175	175	:	
Ь р							
, c	•						
	II other revenue					_	
	otal. Add lines 11a-11d		•	175			
12 To	otal revenue. See instructions	· •	_ _	540,050	1,572	0	. 0

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		BAPONICOS .	general expenses	- CAPOLICOO
•	organizations in the U.S. See Part IV, line 21			I	
2	Grants and other assistance to individuals in			· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,
_	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,			· · · · · · · · · · · · · · · · · · ·	!!****
	organizations, and individuals outside the			1	
	U S. See Part IV, lines 15 and 16			1	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees		İ		
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	351,440	351,440		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	86,823	86,823		
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	74,749	74,749		
b					
С	Accounting	6,500		6,500	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g		222,587	222,047	540	
12	Advertising and promotion	15,780	10,282	5,498	
13	Office expenses	27,686	11,802	15,884	
14	Information technology				
15	Royalties				
16	Occupancy	23,845		23,845	
17	Travel	10,752		10,752	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	33,375	33,375		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	745		745	
23	Insurance	625		625	
24	Other expenses Itemize expenses not covered			1	
	above (List miscellaneous expenses in line 24f If			, I	
	line 24f amount exceeds 10% of line 25, column	1			
	(A) amount, list line 24f expenses on Schedule O)				
а					
b					
С					
d					
е					
f	All other expenses				
25	Total functional expenses.Add lines 1 through 24f	854,907	790,518	64,389	0
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			1	

41,714	art X	Balance Sheet			(A)		(B)
					Beginning of year_		End of year
	1	Cash—non-interest bearing			112,116	1	79,128
	2	Savings and temporary cash investments			593,853	2	300,487
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, directors, tr			1		
		employees, and highest compensated employees Compl	-				
		Schedule L			5		
	6	Receivables from other disqualified persons (as defined u	[
		4958(f)(1)), persons described in section 4958(c)(3)(B), a					
		employers and sponsoring organizations of section 501(c)(9) voluntary				
		employees' beneficiary organizations (see instructions)		6			
Assets	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use		. [8	
ď	9	Prepaid expenses and deferred charges				9	
		Land, buildings, and equipment cost or					
		other basis. Complete Part VI of Schedule D	10a	63,484			
	ь	Less: accumulated depreciation	10b	62,794	1,436	10c	690
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11	<u> </u>		12	-	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		114,249	15	140,868	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	821,654	16	521,173		
	17	Accounts payable and accrued expenses		12,711	17	27,085	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities		Ī		20	
S	21	Escrow or custodial account liability Complete Part IV of	Schedule D	Γ.		21	
Liabilities	22	Payables to current and former officers, directors, trustee		Γ			
Ē		employees, highest compensated employees, and disqua	=	1			
<u>.e</u>		Complete Part II of Schedule L		[22	
_	23	Secured mortgages and notes payable to unrelated third	parties		-	23	
	24	Unsecured notes and loans payable to unrelated third pai				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			12,711	26	27,085
s		Organizations that follow SFAS 117, check here ▶ 3	and complete				
Se		lines 27 through 29, and lines 33 and 34.	_				
an	27	Unrestricted net assets			498,643	27	284,138
Ba	28	Temporarily restricted net assets			310,300	28	209,950
豆	29	Permanently restricted net assets				29	
5		Organizations that do not follow SFAS 117, check her	re ▶ and				
Ē		complete lines 30 through 34.	·				
0	30	Capital stock or trust principal, or current funds		į		30	
ě	31	Paid-in or capital surplus, or land, building, or equipment	fund			31	
155	32	Retained earnings, endowment, accumulated income, or	•			32	
Net Assets or Fund Balances	33	Total net assets or fund balances	J 101100		808,943	33	494,088
ā	34	Total liabilities and net assets/fund balances		<u> </u>	821,654	34	521,173

Form **990** (2010)

orm	990 (2010)	United	National	Indian	Tribal	Youth	73-1010390	_			Pa	ge 12
Pa	rt XI	Reconciliat	ion of Net Ass	ets								
		Check if Sc	hedule O conta	ains a resp	onse to any	/ question i	in this Part XI					
1	Total rever	nue (must equa	ıl Part VIII, column ((A), line 12)				1	1	5	40,	050
2			ual Part IX, column		•				2		54,	
3								14,				
4								08,				
5			ets or fund balance		-		' ''	•	5			
6		-	es at end of year. (•	ust equal Part	X. line 33.					
	column (B)		,,		-, .,		.,		6	4	94,	880
Pa			tatements and	Reporting			•	<u>, </u>	<u></u>			
			hedule O conta			, auestion i	in this Part XII					
											Yes	No
1	Accounting	method used	to prepare the Forn	n 990	Cash X	Accrual	Other					
	_		ed its method of acc		a prior vear or	checked "Othe	er." explain in					
	Schedule (_			, , , , , , , , , , , , , , , , , , , ,							
2a	Were the o	rganization's fi	nancial statements	compiled or re	eviewed by an	ındependent a	accountant?			2a		х
b		-	nancial statements	•	•	•				2b	Х	
c	If "Yes" to I	ine 2a or 2b, de	oes the organizatio	n have a com	mittee that ass	umes respons	ibility for oversight					
	of the aud	it, review, or co	mpilation of its fina	ncial statemer	nts and selection	on of an indep	endent accountant?			2c	X	
	If the organ	nization change	ed either its oversig	ht process or	selection proce	ess during the	tax year, explain in					
	Schedule ()	_	•	-	_						
d	If "Yes" to I	line 2a or 2b, cl	heck a box below to	o indicate whe	ther the financ	al statements	for the year were			•		I
	issued on a	a separate basi	is, consolidated bas	sis, or both:						-		
		ate basis	Consolidated bas	_	consolidated	and separate	basis					
3a	As a result	of a federal aw	vard, was the orgar	nization require	ed to undergo	an audit or aud	dits as set forth in					
	the Single	Audit Act and C	OMB Circular A-133	37	_					3a		X
b	If "Yes," did	d the organizati	on undergo the red	uired audit or	audits? If the o	organization di	d not undergo the					
	required au	ıdıt or audıts, e	xplain why in Sche	dule O and de	scribe any ste	ps taken to un	dergo such audits			3b	<u> </u>	
										Forr	ո 990	(2010)

SCHEDULE A (Form 990 or 990-EZ)

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.

2010
Open to Public

Inspection

OMB No 1545-0047

Internal Revenue Service

Name of the organization

Department of the Treasury

United National Indian Tribal Youth Tribal Youth, Inc.

Employer identification number 73-1010390

Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is. (For lines 1 through 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) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). 6 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) R An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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. c | Type III-Functionally integrated Type II 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 II, Type III, 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) and No (iii) below, the governing body of 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(iu) Provide the following information about the supported organization(s) (i) Name of supported (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of (ii) EIN (iii) Type of organization the organization in organization in col support organization (described on lines 1-9 in col (i) listed in your col (i) of your (i) organized in the above or IRC section governing document? support? US? (see instructions)) Yes Yes No Yes Nο No (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2010 United National Indian Tribal Youth 73-1010390

Part II 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")			100.01			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge			_			
4 5	Total. Add lines 1 through 3 The portion of total contributions by		<u> </u>				
J	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		İ				
	tion B. Total Support		1				
Cale	ndar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, 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 IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)				12	
13	First five years. If the Form 990 is for the o	organization's first,	second, third, fourtl	n, or fifth tax year a	as a section 501(c)	(3)	
	organization, check this box and stop here				_		•
Sec	tion C. Computation of Public Su					· · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2010 (line 6,	` '	•	(f))		14	
15	Public support percentage from 2009 Sche					15	<u>%</u>
16a	33 1/3% support test—2010. If the organiz				1/3% or more, che	ck this	▶ □
	box and stop here. The organization qualif	, ,					
b	33 1/3% support test—2009. If the organiz				is 33 1/3% or more	•	▶ □
	check this box and stop here. The organiz	•		-		4	
17a	10%-facts-and-circumstances test—201	•					
	10% or more, and if the organization meets				-		
	Part IV how the organization meets the "fac	ts-and-circumstan	ces test. The organ	lization qualines a	s a publicly suppor	tea	▶ □
	organization	. 1641		t 10 10-	40h 47a and l		
b	10%-facts-and-circumstances test—200 15 is 10% or more, and if the organization is	•				ille	
	,			•		chu	
	Explain in Part IV how the organization med	ets the Tacts-and-C	arcumstances test.	rne organization	quaimes as a publi	uy	▶ □
10	supported organization Private foundation. If the organization did	not check a hay a	 n line 13 16a 16b	17a or 17h chool	this how and see		
18	instructions	HOLCHECK & DOX OF	1 IIII C 13, 10a, 100,	ira, or irb, cieci	Cuis DOX allo See		▶ □

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	quality under the	ne tests listed	below, please	complete Part	II. <u>)</u>	
	tion A. Public Support	() 0000	43.0007	4) 0000	(1) 2022	4 > 0040	
	ndar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	656,541	829,340	343,722	610,972	538,478	2,979,053
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the	100 610	146 200	10.000	27. 224	1 570	202 014
	organization's fax-exempt purpose	180,619	146,289	18,000	37,334	1,572	383,814
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	837,160	975,629	361,722	648,306	540,050	3,362,867
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	172,046	136,376	13,000		+	321,422
С 8	Add lines 7a and 7b	172,046	136,376	13,000			321,422
٥	Public support (Subtract line 7c from line 6)	1					3,041,445
Sec	tion B. Total Support	<u> </u>				1	3,011,113
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	837,160	975,629	361,722	648,306	540,050	3,362,867
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income from similar sources	20,139	15,656	7,934			43,729
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	20,139	15,656	7,934			43,729
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					o	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	857,299	991,285	369,656	648,306	540,050	3,406,596
14	First five years. If the Form 990 is for the o	-	econd, third, fourth	, or fifth tax year as	a section 501(c)(3)	. [
	organization, check this box and stop here						<u> </u>
	tion C. Computation of Public Su					T 1	
15	Public support percentage for 2010 (line 8,	• • • • • • • • • • • • • • • • • • • •	•))		15	89.28 %
16	Public support percentage from 2009 Sched	_				16	82.05 %
	tion D. Computation of Investmen			Luman (6)		17	1 0/
17 40	Investment income percentage for 2010 (lin		•	iumn (T)) .	••	18	1 <u>%</u> 2 %
18 19a	Investment income percentage from 2009 S 33 1/3% support tests—2010. If the organ			and line 15 is mor	e than 33 1/20/. on		2 70
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests—2009. If the organ	x and stop here. The ization did not check	e organization qual a box on line 14 o	ifies as a publicly s r line 19a, and line	upported organizat 16 is more than 33	ion 1/3%, and	> X
20	line 18 is not more than 33 1/3%, check this Private foundation. If the organization did	= = = = = = = = = = = = = = = = = = =	-			nization	

Schedule A (Form 990 or 990-EZ) 2010 United National Indian Tribal Youth 73-1010390

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public

Inspection **Employer identification number** Name of the organization United National Indian Tribal Youth 73-1010390 Tribal Youth, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	dule D (Form 990) 2010 United Nat	* *				73-101					ge 2
Pa	ert III Organizations Maintaining C							ets (c	ontinue	ed)	
3	Using the organization's acquisition, accession, collection items (check all that apply):	and other records, c	heck any of	the following	that are a	a significant us	e of its				
а	Public exhibition	d 🗌 L	oan or excha	ange program	ıs						
b	Scholarly research	e 🗍 C	ther								
С	Preservation for future generations	_									
4	Provide a description of the organization's collect	ctions and explain ho	w they furthe	er the organiz	ation's e	xempt purpose	ın Part				
	XIV										
5	During the year, did the organization solicit or re assets to be sold to raise funds rather than to be					nılar			Yes	;	No
Pa	ert IV Escrow and Custodial Arran					nswered "Ye	es" to Fo	rm 990	D. Part	IV,	
	line 9, or reported an amount								•	•	
1a	Is the organization an agent, trustee, custodian of			_	assets r	not					
	included on Form 990, Part X?	•							Yes	, \Box	No
b	If "Yes," explain the arrangement in Part XIV and	d complete the follow	ing table:	•							
		•	_						Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Form	990, Part X, line 21	7						Yes	, [No
	If "Yes," explain the arrangement in Part XIV										
	ert V Endowment Funds. Comple	te if organizatio	n answer	ed "Yes" to	Form	990, Part I	V, line 10).			
		(a) Current year	(b)	Prior year	(c) Tv	vo years back	(d) Three ye	ars back	(e) Four	years t	ack
1a	Beginning of year balance						, ,,,,				
b	Contributions						:				
С	Net investment earnings, gains, and					-					
	losses										
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the year en	nd balance held as:									
а	Board designated or quasi-endowment ▶	%									
b	Permanent endowment ▶ %										
С	Term endowment ▶ %										
3a	Are there endowment funds not in the possession	on of the organization	that are he	ld and admini	stered fo	r the			_		
	organization by.									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organizations lis	ted as required on S	chedule R?						3b		
4	Describe in Part XIV the intended uses of the or	ganızatıon's endown	ent funds.								
Pa	ert VI Land, Buildings, and Equipm	nent. See Form	1990, Pai	rt X, line 1	0.						
	Description of investment	(a) Cost or other be (investment)	asıs (t	o) Cost or other (other)	basis	(c) Accur deprec			(d) Book v	/alue	
1a	Land					.,.					
	Buildings										
	Leasehold improvements										
	Equipment .										
	Other										
	I. Add lines 1a through 1e. (Column (d) must equa	al Form 990, Part X,	column (B),	line 10(c).)			•				

DAA

Schedule D (F			73-1010390	Page 3
Part VII	Investments—Other Securities. See Form 99			
	(a) Description of security or category	(b) Book value	(c) Method of valua Cost or end-of-year mar	
	(including name of security)	-	Cost or end-or-year mar	ket value
(1) Financial (
(2) Closely-ne (3) Other	eld equity interests			
				
(A)				
(B)				
(C)			-	
(D)				
(E)				
(F)				
(G) (H)				
(I)				
	n (b) must equal Form 990, Part X, col (B) line 12)		***************************************	
Part VIII	Investments—Program Related. See Form 9			
	(a) Description of investment type	(b) Book value	(c) Method of valua	tion
			Cost or end-of-year mar	ket value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13))		
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
(1)	Other Assets Life Insu			120,600
(2)	Okahoma City Community	roundation		20,268
_(3)				
_(4)				
(5)				
(6)				
(7)				
(8)		 	-	•
<u>(9)</u> (10)				
	n (b) must equal Form 990, Part X, col (B) line 15)	· · · · · · · · · · · · · · · · · · ·	•	140,868
Part X	Other Liabilities. See Form 990, Part X, line 2	25.		
1.	(a) Description of liability	(b) Amount	· · · · · · · · · · · · · · · · · · ·	
	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	n (b) must equal Form 990, Part X, col. (B) line 25)	>		
	C 740) Footnote In Part XIV, provide the text of the footnote to	o the organization's financial st	tatements that reports the	
organization's	liability for uncertain tax positions under FIN 48 (ASC 740)			

Sche	dule D (Form 990) 2010 United National Indian Tribal				Page 4				
Pa	Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements								
1	Total revenue (Form 990, Part VIII, column (A), line 12)			_1_					
2	Total expenses (Form 990, Part IX, column (A), line 25)			_2_					
3	Excess or (deficit) for the year Subtract line 2 from line 1		3						
4	Net unrealized gains (losses) on investments			4					
5	Donated services and use of facilities			5					
6	Investment expenses			6					
7	Prior period adjustments			7					
8	Other (Describe in Part XIV)			8					
9	Total adjustments (net). Add lines 4 through 8			9					
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9			10					
₽a	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts With	Revenue per Retu	rn					
1	Total revenue, gains, and other support per audited financial statements			1					
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12								
а	Net unrealized gains on investments	2a							
b	Donated services and use of facilities	2b							
C	Recoveries of prior year grants	2c							
d	Other (Describe in Part XIV.)	2d							
е	Add lines 2a through 2d			2e					
3	Subtract line 2e from line 1			3					
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)	4b							
С	Add lines 4a and 4b			4c					
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5					
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per Re	turn					
1	Total expenses and losses per audited financial statements			1					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.								
а	Donated services and use of facilities	2a							
b	Prior year adjustments	2b							
C	Other losses	2c							
d	Other (Describe in Part XIV)	2d							
е	Add lines 2a through 2d			2e					
3	Subtract line 2e from line 1			3					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:								
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other (Describe in Part XIV.)	4b							
С	Add lines 4a and 4b			4c					
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5					

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, line 2, 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

Part XIV Supplemental Information

Schedule D (Form 990) 2010 United National Indian Tribal Youth 73-1010390

Supplemental Information (continued)

Page 5

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

OMB No 1545-0047

Name of the organization

United National Indian Tribal Youth Tribal Youth, Inc.

Employer identification number 73 - 1010390

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Board reviews the 990 before it is filed with the IRS.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation All documents are made available upon request at the entity's location.