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Form 990

## Return of Organization Exempt From Income Tax

2012

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

Open to Public Inspection

## A For the 2012 calendar year, or tax year beginning 01-01-2012, 2012, and ending 12-31-2012

B Check if applicable	C Name of organization AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH		D Employer identification number 54-1848713
<input type="checkbox"/> Address change	Doing Business As		
<input type="checkbox"/> Name change			
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (202) 657-0616
<input type="checkbox"/> Terminated	1110 VERNONT AVENUE NW NO 900		
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		
<input type="checkbox"/> Application pending			G Gross receipts \$ 10,295,214
F Name and address of principal officer JOHN GOMPERTS 1110 VERNONT AVENUE NW NO 900 WASHINGTON, DC 20005		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ► WWW.AMERICASPROMISE.ORG	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation 1997	M State of legal domicile MD

## Part I Summary

1 Briefly describe the organization's mission or most significant activities AMERICA'S PROMISE GRAD NATION CAMPAIGN MOBILIZES AMERICANS TO END THE DROPOUT CRISIS		
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets		
3 Number of voting members of the governing body (Part VI, line 1a) . . . . .	3	36
4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4	35
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	5	87
6 Total number of volunteers (estimate if necessary) . . . . .	6	35
7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a	0
b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b	0

8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g) . . . . .	7,538,319	7,789,560
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	34,000	880,447
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	236,651	363,952
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	-66,427	-27,633
	7,742,543	9,006,326

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .	Prior Year	Current Year
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	2,009,259	2,099,889
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . .	0	0
16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	5,952,197	6,184,481
b Total fundraising expenses (Part IX, column (D), line 25) ► 122,750	537,588	0
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . .	7,026,357	7,335,556
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	15,525,401	15,619,926
19 Revenue less expenses Subtract line 18 from line 12 . . . . .	-7,782,858	-6,613,600

20 Total assets (Part X, line 16) . . . . .	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26) . . . . .	31,309,655	21,316,462
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	2,622,307	6,207,575
	28,687,348	15,108,887

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	***** Signature of officer DONNA M ANDERSON CFO, CAO Type or print name and title	2013-05-14 Date
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Paid Preparer Use Only	Print/Type preparer's name FRANK H SMITH	Preparer's signature	Date 2013-05-14	Check <input type="checkbox"/> if self-employed	PTIN P00639053
	Firm's name ► RAFFA PC		Firm's EIN ► 52-1511275		
	Firm's address ► 1899 L STREET NW SUITE 900 WASHINGTON, DC 20036		Phone no (202) 822-5000		

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

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III **1 Briefly describe the organization's mission**

AMERICA'S PROMISE ALLIANCE (AMERICA'S PROMISE) IS THE NATION'S LARGEST PARTNERSHIP ORGANIZATION DEDICATED TO IMPROVING THE LIVES OF CHILDREN AND YOUTH BY RAISING AWARENESS, SUPPORTING COMMUNITIES, AND ENGAGING IN NON-PARTISAN ADVOCACY

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**2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?** Yes  No

If "Yes," describe these new services on Schedule O

**3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?** Yes  No

If "Yes," describe these changes on Schedule O

**4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**

**4a** (Code ) (Expenses \$ 5,136,343 including grants of \$ 1,027,989 ) (Revenue \$ 0 )

COMMUNITY ACTION - STRENGTHENING COMMUNITIES LIES AT THE HEART OF OUR GRAD NATION WORK COMMUNITIES ARE THE FRONT LINE FOR STOPPING THE DROPOUT CRISIS AND ENSURING THAT YOUNG PEOPLE EXPERIENCE THE FIVE PROMISES OUR ROLE, AS PART OF BUILDING A MOVEMENT, IS TO ENGAGE COMMUNITIES, SUPPORT THEIR EFFORTS TO INCREASE THE PRESENCE OF THE FIVE PROMISES, AS THEY SEEK TO END THEIR LOCAL DROPOUT CRISIS, AND TO HELP THEM ORGANIZE THEIR WORK

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**4b** (Code ) (Expenses \$ 2,836,289 including grants of \$ 371,000 ) (Revenue \$ 102,000 )

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

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**4c** (Code ) (Expenses \$ 2,175,552 including grants of \$ 20,400 ) (Revenue \$ 60,000 )

AWARENESS - AS PART OF WHAT MUST BE AN ONGOING EFFORT, WE CONTINUE TO RAISE AWARENESS NATIONALLY AND LOCALLY WE ARE WORKING TO HELP THE NATION BETTER RECOGNIZE THE RESOURCES ALL CHILDREN NEED, WHERE NEEDS ARE GOING UNMET, HOW ALL AMERICANS ARE AFFECTED, WHERE CHANGE NEEDS TO OCCUR, AND HOW ALL AMERICANS CAN TAKE ACTION AND BE PART OF THE SOLUTION OURS IS AN AWARENESS EFFORT THAT NOT ONLY INFORMS BUT MOTIVATES OUR AUDIENCES TO ACT IN THIS WAY WE ARE BUILDING SUPPORT FOR POSITIVE CHANGE

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(Code ) (Expenses \$ 1,939,600 including grants of \$ 650,000 ) (Revenue \$ )

KNOWLEDGE MANAGEMENT

(Code ) (Expenses \$ 694,404 including grants of \$ ) (Revenue \$ )

RELATIONSHIP DEVELOPMENT

(Code ) (Expenses \$ 663,130 including grants of \$ 30,500 ) (Revenue \$ 718,447 )

READY NATION

(Code ) (Expenses \$ 185,282 including grants of \$ ) (Revenue \$ )

MILITARY FAMILIES

(Code ) (Expenses \$ 158,261 including grants of \$ ) (Revenue \$ )

ALLIANCE BUILDING

**4d Other program services (Describe in Schedule O )**

(Expenses \$ 3,640,677 including grants of \$ 680,500 ) (Revenue \$ 718,447 )

**4e Total program service expenses ► 13,788,861**

**Part IV Checklist of Required Schedules**

**1** Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

**2** Is the organization required to complete Schedule B, *Schedule of Contributors* (see instructions)?

**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

**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

**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

**6** Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

**7** Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

**8** Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

**9** Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

**10** Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

**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
 

- a** Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- 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
- 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
- e** Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 XI

**12a** Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

**b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

**13** Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

**14a** Did the organization maintain an office, employees, or agents outside of the United States?
 

- b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

**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

**16** Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV

**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)

**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

**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

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

- b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
<b>1</b>	Yes	
<b>2</b>	Yes	
<b>3</b>		No
<b>4</b>	Yes	
<b>5</b>		No
<b>6</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		No
<b>10</b>		No
<b>11a</b>	Yes	
<b>11b</b>		No
<b>11c</b>		No
<b>11d</b>		No
<b>11e</b>	Yes	
<b>11f</b>	Yes	
<b>12a</b>	Yes	
<b>12b</b>		No
<b>13</b>		No
<b>14a</b>		No
<b>14b</b>		No
<b>15</b>		No
<b>16</b>		No
<b>17</b>		No
<b>18</b>	Yes	
<b>19</b>		No
<b>20a</b>		No
<b>20b</b>		

**Part IV Checklist of Required Schedules (continued)**

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 through 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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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)	28a	No	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	No	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	No	
c	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	29	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	No	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	34	No	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	35a	No	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b		
b	If "Yes" to line 35a, 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	No	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37	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	38	Yes	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	<b>Note.</b> All Form 990 filers are required to complete Schedule O			

**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
<b>1a</b> Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<b>1a</b>	82	
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b>	0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	Yes	
<b>2a</b> 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	<b>2a</b>	87	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	No	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>		
<b>4a</b> 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)?	<b>4a</b>	No	
<b>b</b> 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			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	No	
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	No	
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>	No	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>	<b>7a</b>	Yes	
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7b</b>	Yes	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7c</b>	No	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7d</b>		
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7e</b>	No	
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7f</b>	No	
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7g</b>		
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7h</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>8</b>		
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>9a</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>	<b>9b</b>		
<b>a</b> Did the organization make any taxable distributions under section 4966?			
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?			
<b>10 Section 501(c)(7) organizations.</b> Enter	<b>10a</b>		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10b</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
<b>11 Section 501(c)(12) organizations.</b> Enter	<b>11a</b>		
<b>a</b> Gross income from members or shareholders	<b>11b</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	<b>13a</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	<b>13b</b>		
<b>b</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	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	No	
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		

**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 any question in this Part VI

### Section A. Governing Body and Management

			Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	36	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b>	35	
<b>2</b>	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?	<b>2</b>	Yes	
<b>3</b>	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?	<b>3</b>	No	
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>	No	
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>	No	
<b>6</b>	Did the organization have members or stockholders?	<b>6</b>	No	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>	No	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>	No	
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	<b>8a</b>	Yes	
<b>a</b>	The governing body?	<b>8b</b>	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>9</b>	No	
<b>9</b>	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			

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	No
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	Yes
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	Yes
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	Yes
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	Yes
<b>13</b>	Did the organization have a written whistleblower policy?	<b>13</b>	Yes
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>14</b>	Yes
<b>15</b>	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?	<b>15a</b>	Yes
<b>a</b>	The organization's CEO, Executive Director, or top management official	<b>15b</b>	Yes
<b>b</b>	Other officers or key employees of the organization		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	No
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	<b>16b</b>	

### Section C. Disclosure

<b>17</b>	List the States with which a copy of this Form 990 is required to be filed	AL , AK , AZ , AR , CA , CO , CT , FL , GA , HI , IL , KS , KY , LA , ME , MD , MA , MI , MN , MO , MS , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI
<b>18</b>	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 made these available. Check all that apply	
	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
<b>19</b>	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
<b>20</b>	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	DONNA M ANDERSON 1110 VERMONT AVENUE NW SUITE 900 WASHINGTON, DC (202) 657-0616

## **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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

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

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

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PINEROCK 1820 MICHAEL FARADAY DRIVE SUITE 2 RESTON VA 20190	EVENT PRODUCTION	703,593
TATE & TRYON 2021 L STREET NW SUITE 300 WASHINGTON DC 20036	OUTSOURCED ACCOUNTING SERVICES	265,780
ENVIRONICS COMMUNICATION 2000 L STREET NW SUITE 520 WASHINGTON DC 20036	STRATEGIC COMMUNICATIONS	205,392
DUKE UNVIVERSITY 2024 W MAIN STREET ROOM 102 DURHAM NC 27708	EVALUATION	192,288
THE URBAN INSTITUTE 2100 M STREET NW WASHINGTON DC 20037	RESEARCH	181,972
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. <input checked="" type="checkbox"/>		

**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b> 30,293			
	<b>b</b> Membership dues . . . . .	<b>1b</b>			
	<b>c</b> Fundraising events . . . . .	<b>1c</b> 153,528			
	<b>d</b> Related organizations . . . . .	<b>1d</b>			
	<b>e</b> Government grants (contributions)	<b>1e</b> 41,472			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 7,564,267			
	<b>g</b> Noncash contributions included in lines 1a-1f \$		37,542		
	<b>h</b> <b>Total.</b> Add lines 1a-1f . . . . .		7,789,560		
<b>Program Service Revenue</b>	<b>2a</b> CONTRACT REVENUE	Business Code 900099	880,447	880,447	
	<b>b</b>				
	<b>c</b>				
	<b>d</b>				
	<b>e</b>				
	<b>f</b> All other program service revenue				
	<b>g</b> <b>Total.</b> Add lines 2a-2f . . . . .		880,447		
	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		196,650		196,650
<b>4</b> Income from investment of tax-exempt bond proceeds					
<b>5</b> Royalties . . . . .		50,471		50,471	
<b>6a</b> Gross rents	(i) Real	(ii) Personal			
<b>b</b> Less rental expenses					
<b>c</b> Rental income or (loss)					
<b>d</b> Net rental income or (loss) . . . . .					
<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
<b>b</b> Less cost or other basis and sales expenses	1,335,072				
<b>c</b> Gain or (loss)	1,167,770				
<b>d</b> Net gain or (loss) . . . . .	167,302				167,302
<b>8a</b> Gross income from fundraising events (not including \$ 153,528 of contributions reported on line 1c) See Part IV, line 18 . . . . .					
<b>a</b>	43,014				
<b>b</b> Less direct expenses . . . . .	<b>b</b> 121,118				
<b>c</b> Net income or (loss) from fundraising events . . . . .		-78,104			-78,104
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>				
<b>b</b> Less direct expenses . . . . .	<b>b</b>				
<b>c</b> Net income or (loss) from gaming activities . . . . .					
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>				
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>				
<b>c</b> Net income or (loss) from sales of inventory . . . . .					
<b>Miscellaneous Revenue</b>	Business Code				
<b>11a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b> All other revenue . . . . .					
<b>e</b> <b>Total.</b> Add lines 11a-11d . . . . .					
<b>12</b> <b>Total revenue.</b> See Instructions . . . . .		9,006,326	880,447	0	336,319

**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)

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,089,889	2,089,889		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	10,000	10,000		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	1,243,110	623,217	556,504	63,389
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	4,029,621	3,124,614	898,775	6,232
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	101,255	77,282	23,652	321
9 Other employee benefits . . . . .	473,280	339,074	129,828	4,378
10 Payroll taxes . . . . .	337,215	239,846	92,960	4,409
11 Fees for services (non-employees)				
a Management . . . . .				
b Legal . . . . .	44,529		44,529	
c Accounting . . . . .	381,990		381,990	
d Lobbying . . . . .				
e Professional fundraising services See Part IV, line 17				
f Investment management fees . . . . .				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	2,463,862	2,175,423	288,439	
12 Advertising and promotion . . . . .	21,732	21,732		
13 Office expenses . . . . .	639,345	458,864	180,481	
14 Information technology . . . . .	274,665	132,728	141,937	
15 Royalties . . . . .				
16 Occupancy . . . . .	683,123		683,123	
17 Travel . . . . .	298,397	222,325	75,658	414
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .	1,989,657	1,893,323	52,727	43,607
20 Interest . . . . .	20,475		20,475	
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	356,490		356,490	
23 Insurance . . . . .	78,297		78,297	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O )				
a DUES & MEMBERSHIPS	64,654	35,998	28,656	
b MISCELLANEOUS	18,340	2,487	15,853	
c G&A ALLOCATION	0	2,342,059	-2,342,059	
d				
e All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	15,619,926	13,788,861	1,708,315	122,750
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**Check if Schedule O contains a response to any question in this Part X 

		<b>(A)</b> Beginning of year	<b>(B)</b> End of year	
<b>Assets</b>				
1	Cash—non-interest-bearing	4,611,515	<b>1</b>	2,380,526
2	Savings and temporary cash investments	943,650	<b>2</b>	334,135
3	Pledges and grants receivable, net	19,621,215	<b>3</b>	12,551,921
4	Accounts receivable, net	14,251	<b>4</b>	3,193
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		<b>5</b>	
6	Loans and other 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) Complete Part II of Schedule L		<b>6</b>	
7	Notes and loans receivable, net		<b>7</b>	
8	Inventories for sale or use		<b>8</b>	
9	Prepaid expenses and deferred charges	179,545	<b>9</b>	249,113
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	<b>10a</b>	2,790,721	
b	Less accumulated depreciation	<b>10b</b>	1,380,505	1,646,902
			<b>10c</b>	1,410,216
11	Investments—publicly traded securities	4,147,179	<b>11</b>	4,305,995
12	Investments—other securities See Part IV, line 11		<b>12</b>	
13	Investments—program-related See Part IV, line 11		<b>13</b>	
14	Intangible assets		<b>14</b>	
15	Other assets See Part IV, line 11	145,398	<b>15</b>	81,363
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	31,309,655	<b>16</b>	21,316,462
<b>Liabilities</b>				
17	Accounts payable and accrued expenses	870,126	<b>17</b>	742,266
18	Grants payable	102,556	<b>18</b>	4,031,026
19	Deferred revenue		<b>19</b>	
20	Tax-exempt bond liabilities		<b>20</b>	
21	Escrow or custodial account liability Complete Part IV of Schedule D		<b>21</b>	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		<b>22</b>	
23	Secured mortgages and notes payable to unrelated third parties		<b>23</b>	
24	Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,649,625	<b>25</b>	1,434,283
26	<b>Total liabilities.</b> Add lines 17 through 25	2,622,307	<b>26</b>	6,207,575
<b>Net Assets or Fund Balances</b>				
	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
27	Unrestricted net assets	6,672,931	<b>27</b>	5,358,208
28	Temporarily restricted net assets	22,014,417	<b>28</b>	9,750,679
29	Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
30	Capital stock or trust principal, or current funds		<b>30</b>	
31	Paid-in or capital surplus, or land, building or equipment fund		<b>31</b>	
32	Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
33	Total net assets or fund balances	28,687,348	<b>33</b>	15,108,887
34	<b>Total liabilities and net assets/fund balances</b>	31,309,655	<b>34</b>	21,316,462

**Part XI Reconciliation of Net Assets**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	9,006,326
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,619,926
3	Revenue less expenses Subtract line 2 from line 1	3	-6,613,600
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,687,348
5	Net unrealized gains (losses) on investments	5	50,510
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-7,015,371
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	15,108,887

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

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

**SCHEDULE A**  
(Form 990 or 990EZ)**Public Charity Status and Public Support****2012****Open to Public  
Inspection**

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.

Department of the Treasury  
Internal Revenue Service**Name of the organization**

AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

**Employer identification number**

54-1848713

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

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

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

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

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

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

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

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

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

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

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

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

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

e  a  Type I  b  Type II  c  Type III - Functionally integrated  d  Type III - Non-functionally integrated

f  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)

g  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

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

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

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

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

i  Provide the following information about the supported organization(s)

	<b>Yes</b>	<b>No</b>
11g(i)		
11g(ii)		
11g(iii)		

<b>(i) Name of supported organization</b>	<b>(ii) EIN</b>	<b>(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))</b>	<b>(iv) Is the organization in col (i) listed in your governing document?</b>	<b>(v) Did you notify the organization in col (i) of your support?</b>	<b>(vi) Is the organization in col (i) organized in the U S ?</b>	<b>(vii) Amount of monetary support</b>
<b>Total</b>						

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	23,296,734	11,660,803	18,363,105	7,538,319	7,789,560	68,648,521
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 <b>Total.</b> Add lines 1 through 3	23,296,734	11,660,803	18,363,105	7,538,319	7,789,560	68,648,521
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						24,871,969
6 <b>Public support.</b> Subtract line 5 from line 4						43,776,552

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	23,296,734	11,660,803	18,363,105	7,538,319	7,789,560	68,648,521
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	174,828	177,370	199,436	186,095	247,121	984,850
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)	1,883					1,883
11 <b>Total support</b> (Add lines 7 through 10)						69,635,254
12 Gross receipts from related activities, etc (see instructions)					12	1,076,109
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	62 870 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	68 550 %
16a <b>33 1/3% support test—2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►✓
b <b>33 1/3% support test—2011.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►□
17a <b>10%-facts-and-circumstances test—2012.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		►□
b <b>10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		►□
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		►□

**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 in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6 )						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12 )						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15
16 Public support percentage from 2011 Schedule A, Part III, line 15	16

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18
19a <b>33 1/3% support tests—2012.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	
<b>b</b> <b>33 1/3% support tests—2011.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	
20 <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	

**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).

**Facts And Circumstances Test**

**Explanation**

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**SCHEDULE C**  
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities****2012****Open to Public  
Inspection****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.****If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

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

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

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

**If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**

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

Name of the organization AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH	Employer identification number 54-1848713
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$ \_\_\_\_\_
- 3 Volunteer hours \_\_\_\_\_

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		<b>(a) Filing organization's totals</b>	<b>(b) Affiliated group totals</b>
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		2,897	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		2,897	
<b>d</b> Other exempt purpose expenditures		15,617,029	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		15,619,926	
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns		930,996	
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
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		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		232,749	
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-		0	
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-		0	
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

**4-Year Averaging Period Under Section 501(h)**

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	<b>(a) 2009</b>	<b>(b) 2010</b>	<b>(c) 2011</b>	<b>(d) 2012</b>	<b>(e) Total</b>
<b>2a</b> Lobbying nontaxable amount	1,000,000	919,472	899,391	930,996	3,749,859
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					5,624,789
<b>c</b> Total lobbying expenditures	135,986	60,000	1,751	2,897	200,634
<b>d</b> Grassroots nontaxable amount	250,000	229,868	224,848	232,749	937,465
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,406,198
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

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

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information

Identifier	Return Reference	Explanation

**SCHEDULE D**  
(Form 990)**Supplemental Financial Statements****2012****Open to Public  
Inspection**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
 ► Attach to Form 990. ► See separate instructions.

 Department of the Treasury  
 Internal Revenue Service
**Name of the organization**

AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

**Employer identification number**

54-1848713

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 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?  Yes  No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space
2 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	
a Total number of conservation easements	<b>Held at the End of the Year</b>
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  
 ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
 ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIII, 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 XIII, 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 ► \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

b Assets included in Form 990, Part X ► \$ \_\_\_\_\_

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

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

<b>a</b> <input type="checkbox"/> Public exhibition	<b>d</b> <input type="checkbox"/> Loan or exchange programs
<b>b</b> <input type="checkbox"/> Scholarly research	<b>e</b> <input type="checkbox"/> Other
<b>c</b> <input type="checkbox"/> Preservation for future generations	

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table

	<b>Amount</b>
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses . . . . .					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

**a** Board designated or quasi-endowment

**b** Permanent endowment

**c** Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

**(i)** unrelated organizations . . . . .

**(ii)** related organizations . . . . .

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

<b>Yes</b>	<b>No</b>
<b>3a(i)</b>	
<b>3a(ii)</b>	
<b>3b</b>	

**4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements . . . . .	1,448,310	606,198	842,112	
<b>d</b> Equipment . . . . .	1,325,379	762,149	563,230	
<b>e</b> Other . . . . .	17,032	12,158	4,874	
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .				1,410,216

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12

<b>(a)</b> Description of security or category (including name of security)	<b>(b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 12)

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

**Total.** (Column (b) must equal Form 990, Part X, col (B) line 13.)

**Part IX Other Assets.** See Form 990, Part X, line 15

Total (Column (b)) must equal Form 222, Part X, col (B), line 15.

**Total.** (Column (b) must equal Form 990, Part X, col.(B) line 15.)

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	9,239,326
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	50,510
b	Donated services and use of facilities	2b	61,372
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII )	2d	121,118
e	Add lines 2a through 2d	2e	233,000
3	Subtract line 2e from line 1	3	9,006,326
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII )	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 )	5	9,006,326

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	15,802,416
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	61,372
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII )	2d	121,118
e	Add lines 2a through 2d	2e	182,490
3	Subtract line 2e from line 1	3	15,619,926
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII )	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )	5	15,619,926

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	AMERICA'S PROMISE ALLIANCE PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS
PART XI, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES 121,118
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES 121,118

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

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

OMB No 1545-0047

2012

## Open to Public Inspection

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. Form 990-EZ filers are not required to complete this part.**

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

Name of the organization

AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

**Employer identification number**

54-1848713

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		<b>Yes</b> <b>No</b>			

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

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		GOLF TOURNAMENT (event type)	(event type)	(total number)	
1	Gross receipts . . .	196,542			196,542
2	Less Contributions . . .	153,528			153,528
3	Gross income (line 1 minus line 2) . . .	43,014			43,014
4	Cash prizes . . .				
5	Noncash prizes . . .	1,785			1,785
6	Rent/facility costs . . .	20,086			20,086
7	Food and beverages . . .	10,789			10,789
8	Entertainment . . .				
9	Other direct expenses . . .	88,458			88,458
10	Direct expense summary Add lines 4 through 9 in column (d) . . . . .				(121,118) ►
11	Net income summary Combine line 3, column (d), and line 10 . . . . .				-78,104 ►

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

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

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . .  Yes  No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_

Does the organization operate gaming activities with nonmembers?  Yes  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 gaming?  Yes  No

**13** Indicate the percentage of gaming activity operated in

13a	
13b	

- a** The organization's facility
- b** An outside facility

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

**c** If "Yes," enter name and address of the third party

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**16** Gaming manager information

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

Director/officer

Employee

Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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**Schedule I  
(Form 990)**

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

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

► Attach to Form 990

2012

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

**Employer identification number**

54-1848713

## Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  Yes  No

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

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

**(a) Name and address of organization or government**      **(b) EIN**      **(c) IRC Code section if applicable**      **(d) Amount of cash grant**      **(e) Amount of non-cash assistance**      **(f) Method of valuation (book, FMV, appraisal, other)**      **(g) Description of non-cash assistance**      **(h) Purpose of grant or assistance**

### See Additional Data Table

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3 Enter total number of other organizations listed in the line 1 table .

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) JOURNALISM AWARD	9	10,000			

**Part IV Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 AMERICA'S PROMISE REQUIRES THAT ALL ORGANIZATIONS RECEIVING GRANTS SUBMIT PLANS AND REPORT PROGRESS ON AN INTERIM AND FINAL BASIS IN ADDITION, AMERICA'S PROMISE PROGRAM STAFF WORK CLOSELY WITH GRANT RECIPIENTS TO MONITOR PROGRESS

## Software ID:

## Software Version:

EIN: 54-1848713

Name: AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WI COUNCIL ON CHILDREN AND FAMILIES555 WEST WASHINGTON AVE SUITE 200 MADISON, WI 53703	39-0806301	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
VOICES FOR VIRGINIA'S CHILDREN701 EAST FRANKLIN STREET SUITE 807 RICHMOND, VA 23210	54-1726265	501(C)(3)	20,000				FIRST FOCUS - CHILDREN IN FOCUS
VOICES FOR UTAH'S CHILDREN747 EAST SOUTH TEMPLE SUITE 100 SALT LAKE CITY, UT 84102	87-0428873	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
UNITED WAY OF THE CAPITAL AREA - MS843 N PRESIDENT STREET JACKSON, MS 39202	64-0303075	501(C)(3)	30,000				FIRST FOCUS - CHILDREN IN FOCUS
UNITED WAY FOR SOUTHEASTERN MICHIGAN660 WOODWARD AVE SUITE 300 DETROIT, MI 48226	20-3099071	501(C)(3)	68,000				FIRST FOCUS - CHILDREN IN FOCUS
TRUSTEES OF TUFTS COLLEGE (TUFTS UNIVERSITY)20 PROFESSORS ROW MEDFORD, MA 02155	04-2103634	501(C)(3)	650,000				APPLIED RESEARCH ON YOUTH DEVELOPMENT
THE CHILDREN'S PARTNERSHIP1351 3RD STREET PROMENADE SUITE 206 206 SANTA MONICA, CA 90410	94-3213100	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
TEXANS CARE FOR CHILDREN811 TRINITY SUITE A AUSTIN, TX 78701	75-2687008	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
SC APPLESEED JUSTICE LEGAL CENTER1518 WASHINGTON STREET COLUMBIA, SC 29201	57-1035023	501(C)(3)	25,000				FIRST FOCUS - CHILDREN IN FOCUS
SARGENT SHRIVER NATIONAL CENTER ON POVERTY LAW111 NORTH WABASH AVENUE CHICAGO, IL 60602	36-3151279	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
RHODE ISLAND KIDS COUNTONE UNION STATION PROVIDENCE, RI 02903	06-1485449	501(C)(3)	20,000				FIRST FOCUS - CHILDREN IN FOCUS
OPERATION SHOESTRING 1711 BAILEY AVENUE JACKSON, MS 39283	64-0471554	501(C)(3)	100,000				FIRST FOCUS - CHILDREN IN FOCUS
OHIO BUSINESS ROUNDTABLE41 SOUTH HIGH STREET COLUMBUS, OH 43215	31-1359114	501(C)(6)	25,000				EARLY CHILDHOOD INVESTMENT
OAKLAND ALLIANCE OF COMMUNITY PARTNERSHIPS3441 ENCINA WAY OAKLAND, CA 94605	20-5673793	501(C)(3)	68,000				FIRST FOCUS - CHILDREN IN FOCUS
NEW MEXICO VOICES FOR CHILDREN2340 ALAMO SE ST SUITE 120 ALBUQUERQUE, NM 87106	85-0348301	501(C)(3)	12,000				FIRST FOCUS - CHILDREN IN FOCUS
MISSISSIPPI CENTER FOR JUSTICE936 DIVISION STREET BILOXI, MS 39530	13-4203234	501(C)(3)	12,000				FIRST FOCUS - CHILDREN IN FOCUS
MICHIGAN'S CHILDREN428 WEST LENAWEE LANSING, MI 48933	38-3078577	501(C)(3)	20,000				FIRST FOCUS - CHILDREN IN FOCUS
MAINE CHILDREN'S ALLIANCE303 STATE STREET AUGUSTA, ME 04330	22-2546643	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
KENTUCKY YOUTH ADVOCATES11001 BLUEGRASS PARKWAY JEFFERSONTOWN, KY 40299	61-0929390	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
JEFFERSON COUNTY PUBLIC SCHOOLSPO BOX 34020 LOUISVILLE, KY 40232	61-6001316	501(C)(3)	68,000				FIRST FOCUS - CHILDREN IN FOCUS
JACKSON COUNTY CIVIC ACTION COMMITTEEPO BOX 8723 MOSS POINT, MI 39562	64-0434184	501(C)(3)	100,000				FIRST FOCUS - CHILDREN IN FOCUS
INTERFAITH WORKS839 ST CHARLES AVENUE SUITE 100 NEW ORLEANS, LA 70130	20-8816026	501(C)(3)	100,000				FIRST FOCUS - CHILDREN IN FOCUS
HARRIS COUNTY COMMISSIONER PRECINCT ONE1001 PRESTON SUITE 950 HOUSTON, TX 77002	76-0454514	N/A	100,000				FIRST FOCUS - CHILDREN IN FOCUS
DC PROMISE NEIGHBORHOOD INITIATIVE INC709 12TH STREET SE WASHINGTON, DC 20003	27-0675043	N/A	69,000				FIRST FOCUS - CHILDREN IN FOCUS
COLORADO CHILDREN'S CAMPAIGN1580 LINCOLN STREET SUITE 42 DENVER, CO 80203	74-2374672	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
CHILDRENS ALLIANCE718 6TH AVENUE SOUTH SEATTLE, WA 98104	91-0982879	501(C)(3)	20,000				FIRST FOCUS - CHILDREN IN FOCUS
CHILDREN NOW1404 FRANKLIN STREET SUITE 700 OAKLAND, CA 94612	94-3059243	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
CHILDREN FIRST FOR OREGON1209 SE BELMONT STREET PORTLAND, OR 97293	94-3168157	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
CHILD AND FAMILY POLICY CENTER505 5TH AVENUE SUITE 404 DES MOINES, IA 50309	42-1378567	501(C)(3)	12,000				FIRST FOCUS - CHILDREN IN FOCUS
CENTER FOR PUBLIC POLICY PRIORITIES7020 EASY WIND DRIVE AUSTIN, TX 78752	74-2898197	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
ARKANSAS ADVOCATES FOR CHILDREN & FAMILIES 1400 WEST MARKHAM LITTLE ROCK, AR 72201	71-0492205	501(C)(3)	20,000				FIRST FOCUS - CHILDREN IN FOCUS
ALIGNMENT NASHVILLE 421 GREAT CIRCLE RD SUITE 100 NASHVILLE, TN 37228	45-0549393	501(C)(3)	71,500				FIRST FOCUS - CHILDREN IN FOCUS
ADVOCATES FOR CHILDREN OF NEW JERSEY 35 HALSEY STREET 2 NEWARK, NJ 70102	22-1695034	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
ADVOCATES FOR CHILDREN & YOUTH8 BALTIMORE, MD 21202	52-1555895	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS
ACTION FOR CHILDREN NORTH CAROLINA3109 POPLARWOOD CT SUITE 300 RALEIGH, NC 27604	58-1534066	501(C)(3)	15,000				FIRST FOCUS - CHILDREN IN FOCUS

**Schedule J**  
(Form 990)**Compensation Information**

OMB No 1545-0047

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.**

**2012****Open to Public Inspection**Name of the organization  
AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH**Employer identification number**

54-1848713

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

**a** Receive a severance payment or change-of-control payment?

**4a**  No

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**4b**  No

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

**4c**  No

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

**a** The organization?

**5a**  No

**b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

**a** The organization?

**6a**  No

**b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**7**  Yes

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**8**  No

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

**9**

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN GOMPERTS PRESIDENT/CEO	(i) 174,464 (ii) 0	0	0	4,900 0	6,809 0	186,173 0	0 0
(2) DONNA M ANDERSON CFO & CAO	(i) 220,704 (ii) 0	0	0	6,750 0	9,402 0	236,856 0	0 0
(3) BRUCE LESLEY PRESIDENT, FIRST FOCUS	(i) 220,341 (ii) 0	0	0	6,438 0	16,753 0	243,532 0	0 0
(4) DAVID PARK EVP, MISSION ADVANCEMENT	(i) 187,656 (ii) 0	25,000 0	0	6,420 0	7,315 0	226,391 0	0 0
(5) FORREST MOORE EVP, KNOWLEDGE MGMT & EDU LIAISON	(i) 191,736 (ii) 0	2,500 0	0	6,019 0	16,428 0	216,683 0	0 0
(6) SARA WATSON DIRECTOR, READYNATION	(i) 181,347 (ii) 0	2,500 0	0	5,455 0	2,915 0	192,217 0	0 0
(7) MELINDA HUDSON EXECUTIVE VICE PRESIDENT	(i) 180,150 (ii) 0	0	0	5,634 0	15,161 0	200,945 0	0 0
(8) RALPH FORSHT SENIOR VICE PRESIDENT, FIRST FOCUS	(i) 149,372 (ii) 0	0	0	4,710 0	17,694 0	171,776 0	0 0
(9) ADIL ALSHAB CHIEF INFORMATION OFFICER	(i) 144,292 (ii) 0	0	0	4,508 0	13,997 0	162,797 0	0 0

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 7	THE BONUSES THAT WERE PAID TO THE EXECUTIVE VICE PRESIDENT OF MISSION ADVANCEMENT, EXECUTIVE VICE PRESIDENT OF KNOWLEDGE MANAGEMENT & EDUCATION, AND THE DIRECTOR OF READYNATION WAS DUE TO THEM TAKING ON ADDITIONAL RESPONSIBILITIES WHILE AMERICA'S PROMISE ALLIANCE HAD VACANCIES IN THEIR SENIOR LEADERSHIP TEAM

**Software ID:****Software Version:****EIN:** 54-1848713**Name:** AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

<b>(A) Name</b>	<b>(B) Breakdown of W-2 and/or 1099-MISC compensation</b>			<b>(C) Deferred compensation</b>	<b>(D) Nontaxable benefits</b>	<b>(E) Total of columns (B)(i)-(D)</b>	<b>(F) Compensation reported in prior Form 990 or Form 990-EZ</b>
	<b>(i) Base Compensation</b>	<b>(ii) Bonus &amp; incentive compensation</b>	<b>(iii) Other compensation</b>				
JOHN GOMPERTS	(i) 174,464 (II) 0	0	0	4,900 0	6,809 0	186,173 0	0 0
DONNA M ANDERSON	(i) 220,704 (II) 0	0	0	6,750 0	9,402 0	236,856 0	0 0
BRUCE LESLEY	(i) 220,341 (II) 0	0	0	6,438 0	16,753 0	243,532 0	0 0
DAVID PARK	(i) 187,656 (II) 0	25,000 0	0	6,420 0	7,315 0	226,391 0	0 0
FORREST MOORE	(i) 191,736 (II) 0	2,500 0	0	6,019 0	16,428 0	216,683 0	0 0
SARA WATSON	(i) 181,347 (II) 0	2,500 0	0	5,455 0	2,915 0	192,217 0	0 0
MELINDA HUDSON	(i) 180,150 (II) 0	0	0	5,634 0	15,161 0	200,945 0	0 0
RALPH FORSHT	(i) 149,372 (II) 0	0	0	4,710 0	17,694 0	171,776 0	0 0
ADIL ALSHAB	(i) 144,292 (II) 0	0	0	4,508 0	13,997 0	162,797 0	0 0

SCHEDULE M  
(Form 990)

## Noncash Contributions

OMB No 1545-0047

2012

Open to Public  
InspectionDepartment 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  
AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

Employer identification number

54-1848713

## Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified 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 . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
GOLF APPAREL & OTHER ITEMS FOR SPECIAL				
25 Other ► ( <u>EVENT</u> )	X	1	37,542	FMV
26 Other ► ( _____ )				
27 Other ► ( _____ )				
28 Other ► ( _____ )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .		29		

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a		No
31		No
32a		No

**Part II Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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**Schedule M (Form 990) (2012)**

**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 to provide any additional information.  
► Attach to Form 990 or 990-EZ.

**2012****Open to Public  
Inspection**

Name of the organization

AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

**Employer identification number**

54-1848713

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	MICHAEL K. POWELL, BOARD MEMBER, IS THE SON OF THE FOUNDING CHAIRMAN, RETIRED GENERAL COLIN L. POWELL, AND ALMA J. POWELL, CHAIR PERSON, WHO BOTH SERVE ON THE BOARD OF DIRECTORS. IN ADDITION, BOARD MEMBER, JAMES L. BARKSDALE IS THE SPOUSE OF BOARD MEMBER, DONNA BARKSDALE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE AMERICA'S PROMISE ALLIANCE BOARD OF DIRECTORS CHARGES THE AUDIT & FINANCE COMMITTEE WITH REVIEWING THE FORM 990 PRIOR TO FILING A COPY OF THE FORM 990 IS PROVIDED TO THE COMMITTEE AND A CONFERENCE CALL IS HELD TO DISCUSS THE FORM PRIOR TO FILING THE RETURN AFTER REVIEW AND APPROVAL OF THE FORM 990 BY THE AUDIT & FINANCE COMMITTEE, THE FORM 990 IS MADE AVAILABLE TO THE FULL BOARD OF DIRECTORS VIA THE AMERICA'S PROMISE ALLIANCE BOARD OF DIRECTORS WEBSITE PRIOR TO FILING THE FORM 990 REMAINS AVAILABLE ON THE BOARD OF DIRECTORS WEBSITE THROUGHOUT THE YEAR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	AMERICA'S PROMISE ALLIANCE REVIEWS ALL CONTRACTS, AGREEMENTS AND EMPLOYEES FOR CONNECTIONS TO THE BOARD MEMBER. IF A CONFLICT WERE IDENTIFIED, IT WOULD BE REPORTED TO THE PRESIDENT, WHO WOULD IN TURN BRING THE CONFLICT TO THE BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	<p>THE FULL BOARD OF DIRECTORS OF AMERICA'S PROMISE ENDORSES A COMPENSATION PHILOSOPHY FOR THE CEO. THE COMPENSATION PHILOSOPHY IS THE GUIDING FRAMEWORK FOR CEO COMPENSATION. THE BOARD LOOKS TO THE EXECUTIVE COMMITTEE OF THE BOARD TO MAKE A SPECIFIC DETERMINATION OF THE CEO'S COMPENSATION, INCLUDING BASE SALARY, BONUSES (IF ANY), AND OTHER BENEFITS. THIS DETERMINATION IS DONE IN THE CONTEXT OF THE BOARD'S CEO COMPENSATION PHILOSOPHY. THE EXECUTIVE COMMITTEE'S CONSIDERATION INCLUDES AN ASSESSMENT OF THE CEO'S COMPENSATION IN COMPARISON TO RELEVANT UNIVERSES OF PEER ORGANIZATIONS, THE PERFORMANCE OF THE CEO AGAINST OBJECTIVES AND OTHER RELEVANT FACTORS. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REPORTS TO THE FULL BOARD OF DIRECTORS BOTH ITS COMPENSATION DECISIONS AS WELL AS A CONFIRMATION THAT THIS PROCESS WAS APPROPRIATELY UNDERTAKEN TO MAKE ITS DETERMINATION. THE AUDIT AND FINANCE COMMITTEE PROVIDES SUPPORT TO THE EXECUTIVE COMMITTEE BY ENGAGING AN INDEPENDENT COMPENSATION CONSULTANT TO CONDUCT A PEER REVIEW ANALYSIS FROM WHICH RECOMMENDATIONS ARE MADE. THE AUDIT &amp; FINANCE COMMITTEE APPROVES THE USE OF AN BI-ANNUAL SALARY COMPENSATION SURVEY BASED ON AT LEAST THREE INDEPENDENT SURVEYS. THE BI-ANNUAL SURVEY, PREPARED BY AN INDEPENDENT COMPENSATION CONSULTANT, INCLUDES THE POSITION OF PRESIDENT AND CEO AND EXECUTIVE LEADERSHIP AND IS AVAILABLE TO MEMBERS OF THE EXECUTIVE COMMITTEE. THE AUDIT COMMITTEE, SERVING AS THE COMPENSATION COMMITTEE, REVIEWS AND APPROVES THE COMPENSATION OF THE OFFICERS AND KEY EMPLOYEES BASED ON AN ANNUAL REPORT DERIVED FROM AT LEAST THREE INDEPENDENT SURVEYS. PREPARED AND PRESENTED TO THE AUDIT AND FINANCE COMMITTEE. THE COMPENSATION COMMITTEE APPROVES THE USE OF THE SURVEY DATA. THE DECISION IS DOCUMENTED IN THE MINUTES OF THE AUDIT AND FINANCE/COMPENSATION COMMITTEE.</p>

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

Identifier	Return Reference	Explanation
OTHER FEES	FORM 990, PART IX, LINE 11G	CONSULTING PROGRAM SERVICE EXPENSES 850,512 MANAGEMENT AND GENERAL EXPENSES 272,334 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,122,846 STRATEGIC COMMUNICATIONS PROGRAM SERVICE EXPENSES 221,887 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 221,887 POLLING PROGRAM SERVICE EXPENSES 53,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 53,000 EDITORIAL SERVICES PROGRAM SERVICE EXPENSES 128,984 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 128,984 GRAPHIC DESIGN PROGRAM SERVICE EXPENSES 150,479 MANAGEMENT AND GENERAL EXPENSES 9,743 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 160,222 RESEARCH PROGRAM SERVICE EXPENSES 404,181 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 404,181 TV AND VIDEO PRODUCTION PROGRAM SERVICE EXPENSES 143,203 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 143,203 EVALUATION PROGRAM SERVICE EXPENSES 210,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 210,000 PHOTOGRAPHY PROGRAM SERVICE EXPENSES 13,177 MANAGEMENT AND GENERAL EXPENSES 2,450 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,627 TEMPORARY SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 3,912 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 3,912

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	LOSS ON UNCOLLECTIBLE PLEDGE RECEIVABLES - 7,015,371

Identifier	Return Reference	Explanation
		FORM 990, PART IV, LINE 34 AMERICA'S PROMISE ALLIANCE HAS ENTERED INTO A COST-SHARING AGREEMENT WITH FIRST FOCUS CAMPAIGN FOR CHILDREN (FFCC) THAT PROVIDES FOR SHARING OF PERSONNEL, ADMINISTRATION AND EQUIPMENT COSTS. THE TWO ORGANIZATIONS FUNCTION WITH A COMMON MISSION AND SHARE COMMON MANAGEMENT, BUT OPERATE AS SEPARATE ENTITIES WITH SEPARATE BOARDS OF DIRECTORS. THEREFORE, IN ACCORDANCE WITH THE IRS INSTRUCTIONS FFCC WILL NOT BE DISCLOSED ON SCHEDULE R AS A RELATED TAX-EXEMPT ENTITY

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 54-1848713  
**Name:** AMERICA'S PROMISE - THE ALLIANCE FOR YOUTH

### Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
ALMA J POWELL CHAIR PERSON	10 00	X		X			0	0	0
C GREGG PETERSMEYER VICE CHAIR	1 00	X		X			0	0	0
KATHLEEN A MURPHY SECRETARY/TREASURER	1 00	X		X			0	0	0
JAMES L BARKSDALE BOARD MEMBER	1 00	X					0	0	0
DONNA BARKSDALE BOARD MEMBER	1 00	X					0	0	0
IKOTSIMISKIMAKI BECK BOARD MEMBER	1 00	X					0	0	0
KATHERINE BRADLEY BOARD MEMBER	1 00	X					0	0	0
DANIEL CASEY BOARD MEMBER	2 00	X					0	0	0
RAYMOND G CHAMBERS BOARD MEMBER	1 00	X					0	0	0
BRIAN COMER BOARD MEMBER	1 00	X					0	0	0
ANGELA DIAZ BOARD MEMBER	1 00	X					0	0	0
DAN DOMENECH BOARD MEMBER	1 00	X					0	0	0
DAVID DUKES BOARD MEMBER	1 00	X					0	0	0
RAUL FERNANDEZ BOARD MEMBER	1 00	X					0	0	0
HAROLD FORD BOARD MEMBER	1 00	X					0	0	0
BRIAN GALLAGHER BOARD MEMBER	1 00	X					0	0	0
REV DR W WILSON GOODE SR BOARD MEMBER	1 00	X					0	0	0
DANIEL HAMBURGER BOARD MEMBER	1 00	X					0	0	0
LAWRENCE HARRIS BOARD MEMBER	1 00	X					0	0	0
DEON JONES BOARD MEMBER	1 00	X					0	0	0
LARRY A KLANE BOARD MEMBER	1 00	X					0	0	0
CHARLENE LAKE BOARD MEMBER	1 00	X					0	0	0
JOHN E MAUPIN JR BOARD MEMBER	2 00	X					0	0	0
MARGARET MCKENNA BOARD MEMBER	1 00	X					0	0	0
RHONDA MIMS BOARD MEMBER	1 00	X					0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Former Or director	Individual trustee	Institutional Trustee	Officer	Key employee			
ANDREA MITCHELL BOARD MEMBER	1 00	X					0	0	0
MICHAEL PARHAM BOARD MEMBER	1 00	X					0	0	0
MICHAEL K POWELL BOARD MEMBER	1 00	X					0	0	0
EDWARD B RUST BOARD MEMBER	1 00	X					0	0	0
JIN ROY RYU BOARD MEMBER	1 00	X					0	0	0
RON SIMON BOARD MEMBER	1 00	X					0	0	0
MARGARET SPELLINGS BOARD MEMBER	1 00	X					0	0	0
RICK STEPHENS BOARD MEMBER	1 00	X					0	0	0
CARMITA VAUGHAN BOARD MEMBER	1 00	X					0	0	0
ELAINE WYNN BOARD MEMBER	1 00	X					0	0	0
MARGUERITE KONDRAKE PRESIDENT/CEO (THRU 5/2012)	40 00	X	X				126,824	0	6,651
JOHN GOMPERTS PRESIDENT/CEO	40 00	X	X				174,464	0	11,709
RET GEN COLIN L POWELL FOUNDING CHAIRMAN	1 00		X				0	0	0
DONNA M ANDERSON CFO & CAO	40 00		X				220,704	0	16,152
BRUCE LESLEY PRESIDENT, FIRST FOCUS	40 00		X				220,341	0	23,191
DAVID PARK EVP, MISSION ADVANCEMENT	40 00			X			212,656	0	13,735
FORREST MOORE EVP, KNOWLEDGE MGMT & EDU LIAISON	40 00			X			194,236	0	22,447
SARA WATSON DIRECTOR, READYNATION	40 00				X		183,847	0	8,370
MELINDA HUDSON EXECUTIVE VICE PRESIDENT	40 00				X		180,150	0	20,795
RALPH FORSH SENIOR VICE PRESIDENT, FIRST FOCUS	40 00				X		149,372	0	22,404
ADIL ALSHAB CHIEF INFORMATION OFFICER	40 00				X		144,292	0	18,505
KIM HUCKABONE EXECUTIVE HUMAN RESOURCES DIRECTOR	40 00				X		136,034	0	9,044