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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 2013

Open to Public

Form, 990 (2013)

Department of the Treasury Internal Revenue Service ▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

and ending JUL 31, A For the 2013 calendar year, or tax year beginning AUG 1, 2013 D Employer identification number C Name of organization -Address change INTERFAITH YOUTH CORE Name change 30-0212534 Doing Business As Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Termin-ated 312-573-8825 325 N. LASALLE STREET 775 Amended return 4,579,695. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica CHICAGO, IL 60654 H(a) Is this a group return F Name and address of principal officer EBRAHIM PATEL _Yes LX_No for subordinates? SAME AS C ABOVE Yes H(b) Are all subordinates included? Tax-exempt status: X 501(c)(3) __ 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: ► WWW.IFYC.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > Year of formation: 2002 M State of legal domicile: IL Part I | Summary Briefly describe the organization's mission or most significant activities IFYC'S MISSION IS TO MAKE Activities & Governance THE ORGANIZATION'S MOST INTERFAITH COOPERATION A SOCIAL NORM. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 21 6 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990 T, line 34 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 9,206,924. 3,944,241. 8 650,879. 630,893. Program service revenue (Part VIII, line 2g) <u>1,781</u>. 1,925. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,618. 2,636. 9,865,202. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,579,695. 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 10,833, 452,890. 13 0. Ο. Benefits paid to or for members (Part IX, column (A), line 4) 2,556,011. 2,750,791. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,050,423 1,440,043. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,617,267. 4,643,724. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 6,247,935 <64,029.> Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 8,888,185. 9,148,394. 20 Total assets (Part X, line 16) 239,300. 563,538. 21 Total liabilities (Part X, line 26) 8,648,885. 8,584,856. Net assets or fund balances Subtract line 21 from line 20 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 Signature of officer Date Sign FOUNDER & PRESIDENT EBRAHIM PATEL, Here Type or print name and title Check Print/Type preparer's name Freparer's signature P00573131 Paid MARCY STEINDLER Preparer Firm's name MANN. WEITZ & ASSOCIATES L.L.C. Firm's EIN 36-3963131 SWITE 125 Use Only Firm's address 111 DEER LAKE ROAD, Phone no. (847)267-3400 DEERFIELD, IL 60015 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

0-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.
SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2013) Part IV Checklist of Required Schedules

	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		η,	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		X
	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
4	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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	6		\mathbf{X}_{-}
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
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	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			77
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
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 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	X	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
f	· · · · · · · · · · · · · · · · · · ·		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	х	
	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	Λ	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14a		14a		X
	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	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			**
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		X
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ 		
.5	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			000	(0040)

Yes No

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		ŀ	
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		1	
•	any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
Lou	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Х
9 7 -	-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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions).			
•	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
٠.	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
٠.	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		
-	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
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	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	_38	Х	
		Form	990	(2013)

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orm 990	2013) INTERFAITH YOUTH CORE	 <u> 30-0212534</u>	Page :
Part V	Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response or note to any line in this Part V		

	Check in Conduction Contained a copyrises of vices to any size of the contained a copyrise of the copyris of the copyrise of the copyrise of the copyrise of the copyrise			
			Yes	No
_	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 17			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming.			
С		10	х	
٥-	(gambling) winnings to prize winners? There the number of employees reported on Form W.3. Transmittel of Wage and Tax Statements.	1c_	A	
za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 44			
_	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	- 21	
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
3a b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	OD	_	
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
_	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	_		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			.
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
_ b	Section 501(c)(12) organizations. Enter			
11	Gross income from members or shareholders			
a h	Gross income from other sources (Do not net amounts due or paid to other sources against			
D	amounts due or received from them)			
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			•
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O			
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			
С	Enter the amount of reserves on hand	L		L
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			. 000	(0040)

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

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}
Sec	tion A. Governing Body and Management	<u> </u>		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 21			
	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	Enter the number of voting members included in line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	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?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<u>12b</u>	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	<u>X</u>	
13	Did the organization have a written whistleblower policy?	13		<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	<u>X</u>	
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u> </u>
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	l		· ·
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and the second of the second	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)		_	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finar	icial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion.		
	CONRAD HUDSON - 312-573-8896 325 N. LASALLE STREET, SUITE 775, CHICAGO, IL 60654			
			990	(2012)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII	_	<u>-</u>	

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization n	or any related	orga	ınıza	tion	COI	mpe	nsat	ed any current officer, c	irector, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per					is bot or/trus		compensation	compensation	amount of
	week (list any							from the	from related organizations	other compensation
	hours for	Individual trustee or director				_		organization	(W-2/1099-MISC)	from the
	related	tee or	ıstee			usate		(W-2/1099-MISC)	(** 2 / ************************************	organization
	organizations	Itrus	Institutional trustee		oyee	Highest compensated employee				and related
	below	мдиа	ntutro	cer	Key employee	hest c	Former			organizations
	line)	臣	Inst	Officer	Ke.	를	Forr			
(1) DR. WHITNEY ADDINGTON	1.00							•	•	
DIRECTOR	10.00	X				├	-	0.	0.	0.
(2) ALAN SOLOW	10.00	,,		7,				•	0	•
BOARD CHAIR	1 00	X		X				0.	0.	0.
(3) TAREK ELMASRY	1.00	.,						•	0	•
DIRECTOR	1 00	X						0.	0.	0.
(4) REV. DR. WILLIAM ENRIGHT	1.00	x						0.	0.	0.
DIRECTOR	1.00	Λ		_		<u> </u>		0.		0.
(5) DR. ROBERT GERTNER FINANCE COMMITTEE CHAIR	1.00	х		х				0.	0.	0.
(6) REV. FRED DAVIE	1.00	7.		1		1		0.	<u> </u>	<u> </u>
SECRETARY	1.00	х		х		ļ		0.	0.	0.
(7) JESS GREEN	1.00					1			0.	<u> </u>
DIRECTOR		x						0.	0.	0.
(8) PAUL KNITTER	1.00					İ		<u> </u>		
DIRECTOR		X				İ		0.	0.	0.
(9) JEFF LEVY	1.00									
DIRECTOR		X			l			0.	0.	0.
(10) DR. GAIL ROSSEAU	1.00								 -	
DIRECTOR		X						0.	0.	0.
(11) REV. DR. SUSAN THISTLETHWAITE	1.00									
DIRECTOR		X						0.	0.	0.
(12) SUNIL GARG	1.00		ĺ							
DIRECTOR		X						0.	0.	0.
(13) SUSAN KIPHART	1.00									
DIRECTOR		X						0.	0.	0.
(14) RICHARD KIPHART	1.00							_	_	_
DIRECTOR		Х			<u> </u>	ļ		0.	0.	0.
(15) CONNIE DUCKWORTH	1.00				ŀ					•
DIRECTOR	1 00	Х			-		_	0.	0.	0.
(16) STEPHEN BELL	1.00	.,						0	•	•
DIRECTOR	1 00	Х				 	\vdash	0.	0.	0.
(17) S.A.IBRAHIM	1.00	X						^	^	^
DIRECTOR 332007 10-29-13	<u> </u>	Λ	l	L	Ц	Щ	L	0.	0.	0 . Form 990 (2013)

332007 10-29-13



(A) Name and title	(B) Average			Pos				(D) Reportable	(E) Reportable		Es	(F) timate	ed
	hours per	box	not c	ss pe	rson	ıs bot	h an	compensation	compensation			ount	
	week	Η.	сегал	id a d	recto	or/trus	tee)	-	from related			other	
	(list any hours for	trustee or director						the	organizations	.		pensa	
	related	e or d	tee e			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC	"丨		om the anızat	
	organizations	truste	Institutional trustee)ee	mpen		(***2/1099*141100)			•	relat	
	below	Individual	tution	 -	Key employee	est co loyee	 <u> </u>	.			orga	ınızatı	ons
	line)	휼	Insti	Officer	Key 6	Highest compensated employee	퉏						
(18) WINSTON IBRAHIM	1.00												_
DIRECTOR	1 00	X	_	_		 		0.		0.			0.
(19) ANSAF KAREEM	1.00									_			^
DIRECTOR	1 00	X	├	_		H		0.		0.			0.
(20) ANDREA SOLOW	1.00		İ					0.		٥.			Λ
DIRECTOR	1.00	X	\vdash			\vdash	-	U •		٠.			0.
(21) HOWARD MORGAN DIRECTOR	1.00	X				l		0.		٥.			0.
(22) EBRAHIM PATEL	60.00					\vdash	\vdash			•			<u> </u>
FOUNDER AND PRESIDENT	0000	1		x				221,847.		٥.	1	0,2	02.
(23) PETER DE KOCK	60.00					T							
VP OF OPERATIONS & COMMUNICATIONS				X				94,229.		0.		9,7	23.
(24) GABE HAKIM	60.00												
EXECUTIVE VP		ļ	<u> </u>	X				92,412.		0.		3,3	<u>91.</u>
(25) APRIL MENDEZ	60.00												
VP OF CAMPUS MOBILIZING			1			X	L	104,250.		0.		7,3	<u> 26.</u>
		ł											
1b Sub-total		l			<u> </u>	J	<u> </u>	512,738.		0.	3	0,6	42.
c Total from continuation sheets to Part V	II. Section A						•	0.		0.		<u> </u>	0.
d Total (add lines 1b and 1c)							•	512,738.		0.	3	0,6	42.
2 Total number of individuals (including but i	not limited to th	nose	liste	ed al	oove	e) wl	10	received more than \$100	,000 of reportable				
compensation from the organization											т	1	2
										ſ		Yes	No
3 Did the organization list any former officer			e, ke	ey er	npic	yee	, or	highest compensated ei	mployee on	- [v
line 1a? If "Yes," complete Schedule J for							4 ~	thar assessantian from t	the erganization	}	3		X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15									ine organization	1	4	x	ı
5 Did any person listed on line 1a receive or									dual for services	ŀ	-	-25	
rendered to the organization? If "Yes," con							0.0	noo organization or man	aua. 101 00/1/000		5		х
Section B. Independent Contractors													
1 Complete this table for your five highest co	ompensated in	dep	ende	ent c	onti	racto	ors	that received more than	\$100,000 of comp	ensa	ation f	rom	
the organization Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ıth	in the organization's tax y	/ear				
(A) Name and business				_				(B) Description of s	07/1000	_	(C ompe		_
Name and business	address	N	ON	<u> </u>				Description of s	ervices		ompe	isatio	
							_						
					_								
2 Total number of independent contractors	Includes Set	no+ 1	mort o	d +-	th-		p+~	d above) who received =	ore than				
2 Total number of independent contractors \$100,000 of compensation from the organ	_	IOI II	mille	:u 10		ise ii 0	sie	u above) who received if	iore triair				
						-	_	-			Form	200	

Form 990 (2013) INTERFAITH YOUTH CORE 30-0212534 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 3,944,241 g Noncash contributions included in lines 1a-1f \$ 3,944,241 h Total. Add lines 1a-1f Business Code 2 a HONORARIUMS 900099 285,409 285,409 Program Service Revenue 900099 192,015. **b UNIVERSITY REVENUE** 192,015 102,494. c <u>SEMINARS</u>, <u>WORKSHOPS</u> 900099 102,494 49,200. d SURVEY REVENUE 900099 49,200 900099 1,775. 1,775. e PUBLICATIONS PROGRAM f All other program service revenue 630,893 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,925 1,925. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 2,636. 11 a OTHER 900099 2,636 d All other revenue 2,636. Total, Add lines 11a-11d

Form **990** (2013)

0.

Total revenue. See instructions.

579,695

633,529

Form 990 (2013) INTERFAITH YO Part IX Statement of Functional Expenses

		and the second s	
Section 501/c)/2) and 501/c)/4) organizatione muet complete a	ll columns All other organizations mi	iet complete column (Δ)
Section Somethis and Someth	i didanizations must complete a	ii Culuitiits Ali Ulitei Ulualiizaliulis Itil	isi comblete columni (A)

Do n	Check if Schedule O contains a respon ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	(D) Fundraising
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to governments and	405 545	405 545		
	organizations in the United States. See Part IV, line 21	435,517.	435,517.		· · · · ·
	Grants and other assistance to individuals in	4.5.000	4.6.000		
	the United States. See Part IV, line 22	16,323.	16,323.		
	Grants and other assistance to governments,				
	organizations, and individuals outside the	4 050	4 050		
	United States See Part IV, lines 15 and 16	1,050.	1,050.	-	
	Benefits paid to or for members			-	
	Compensation of current officers, directors,	265 614	0.45 600	F0 700	F0 010
	trustees, and key employees	365,614.	247,682.	58,722.	59,210
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0 011 061	4 545 505	206 555	005 650
	Other salaries and wages	2,011,961.	1,517,727.	206,555.	<u> 287,679</u>
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	100 550	454 540	0.050	40 564
	Other employee benefits	182,550.	154,713.	9,273.	18,564
	Payroll taxes	190,666.	144,074.	24,259.	22,333
	Fees for services (non-employees)				
а	Management				
	Legal				
¢	Accounting	17,050.		17,050.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				<u> </u>
	Investment management fees				
_	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	264,181.	247,785.	14,039.	2,357
12	Advertising and promotion				
13	Office expenses	423,605.	396,454.	15,641.	11,510
14	Information technology	150,329.	114,478.	18,743.	17,108
15	Royalties				
16	Occupancy	239,034.	192,138.	18,649.	<u>28,247</u>
17	Travel	157,320.	129,458.	4,280.	23,582
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				 _
19	Conferences, conventions, and meetings	10,373.	6,549.	2,199.	1,625
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	105,295.	80,084.	13,347.	11,864
23	Insurance	28,032.	20,027.	5,105.	2,900
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.)				
а	STAFF DEVELOPMENT	16,482.	12,378.	2,888.	1,216
b	OTHER	14,092.	5,283.	7,317.	1,492
С	FEES AND CHARGES	8,215.	4,886.	727.	2,602
d	BOOKS & SUBSCRIPTIONS	6,035.	3,554.	740.	1,741
	All other expenses				
<u> 25 _</u>	Total functional expenses Add lines 1 through 24e	4,643,724.	3,730,160.	419,534.	494,030
26	Joint costs. 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)				

YOUTH	CORE	30-0212	2534 Page

Part 2		Balance Sheet					
		Check if Schedule O contains a response or not	te to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			990,051.	1	1,573,812.
	2	Savings and temporary cash investments			1,583,141.	2	1,818,886
:	3	Pledges and grants receivable, net			5,866,653.	3	5,353,534
4	4	Accounts receivable, net			86,948.	4	53,031
4	5	Loans and other receivables from current and for	ormer of	ficers, directors,			
		trustees, key employees, and highest compensation	ated em	ployees Complete			
		Part II of Schedule L				5	
(6	Loans and other receivables from other disquali	fied per	sons (as defined under			
		section 4958(f)(1)), persons described in section	(3)(B), and contributing				
		employers and sponsoring organizations of sect					
2		employees' beneficiary organizations (see instr)	Comple	ete Part II of Sch L		6	
Assetts	7	Notes and loans receivable, net				7	
ž į	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges			116,021.	9	140,801
10	0a	Land, buildings, and equipment cost or other					
		basis Complete Part VI of Schedule D	10a	<u>571,860.</u>			
	b	Less accumulated depreciation	10b	363,530.	245,371.	10c	208,330
11	1	Investments - publicly traded securities				11	
1:	2	Investments - other securities. See Part IV, line	11			12	
1:	3	Investments - program-related. See Part IV, line	11			13	
14	4	Intangible assets				14	
15	5	Other assets See Part IV, line 11				15	
10	6	Total assets. Add lines 1 through 15 (must equ	al line 3	4)	8,888,185.	16	9,148,394
10	7	Accounts payable and accrued expenses			176,831.	17	177,345
18	8	Grants payable				18	352,017
19	9	Deferred revenue		_	62,469.	19	34,176
2	0:	Tax-exempt bond liabilities				20	
2	1	Escrow or custodial account liability Complete	Part IV o	of Schedule D		21	
ဂ္ဂ 2	2	Loans and other payables to current and former	r officers	s, directors, trustees,			
		key employees, highest compensated employee	es, and	disqualified persons			
		Complete Part II of Schedule L				22	
- 2	3	Secured mortgages and notes payable to unrela	ated thir	d parties		23	
2	4	Unsecured notes and loans payable to unrelate				24	
2	:5	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24).	. Complete Part X of			
		Schedule D		<u> </u>		25	560 500
2	6	Total liabilities. Add lines 17 through 25			239,300.	26	563,538
ŀ		Organizations that follow SFAS 117 (ASC 958		k here ▶ LXL and			
Net Assets or Fund balances		complete lines 27 through 29, and lines 33 ar	nd 34.		0 046 404		0 686 004
į 2		Unrestricted net assets	_	<u>2,046,494.</u>		2,676,084	
5 2	28	Temporarily restricted net assets		_	6,602,391.	28	5,908,772
2	9	Permanently restricted net assets				29	
2		Organizations that do not follow SFAS 117 (A	ISC 958), check here 🕨 📖			
ָהַ <u> </u>		and complete lines 30 through 34.					
3 3	10	Capital stock or trust principal, or current funds		<u>, </u>		30	
ž 3	31	Paid in or capital surplus, or land, building, or ed		Г		31	
3 _ا ي	32	Retained earnings, endowment, accumulated in	ncome, o	or other funds	0 640 005	32	0 504 056
- 3	3	Total net assets or fund balances		-	8,648,885.	33	8,584,856
3	<u> 4</u>	Total liabilities and net assets/fund balances			8,888,185.	34	9,148,394.

F <u>o</u> rm	990 (2013) INTERFAITH YOUTH CORE	30-023	2534	Pag	ge 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	4,579		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,643		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u> 29.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,648	<u>3,8</u>	<u>85.</u>
5	Net unrealized gains (losses) on investments	_5			
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	8,584	<u>1,8</u>	<u>56.</u>
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			l <u></u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		_2b	X	
	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				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			7.7
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gie Audit			v
	Act and OMB Circular A-133?	خاصية أممت	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	rea auait	3b		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		1.50		1

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

			ITH YOUTH CO						3	<u>0-0212</u>	534	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t) See inst	ructions				
The orga	anization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	ox)					
1 🗆	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)	١.				
2	A school des	scribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗀	A hospital or	a cooperative hospi	tal service organization (described	n section	170(b)(1)	(A)(iii).					
4 🗀	A medical re	search organization	operated in conjunction	with a hos	pital descr	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter 1	the hospital	's nam	e,
	city, and stat	te										
5 🗀	An organizat	on operated for the	benefit of a college or ur	niversity o	wned or op	erated by	a governr	mental unr	t describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6	A federal, sta	ate, or local governm	ent or governmental und	t describe	d ın sectio	n 170(b)(1)(A)(v).					
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general	public desc	ribed ir	n
	section 170	(b)(1)(A)(vi). (Comple	te Part II.)									
8 🗆	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🗀	An organizat	on that normally rec	eives: (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershij	p fees, ai	nd gross re	ceipts f	from
	activities rela	ited to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	ınvestı	ment
	income and i	unrelated business to	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June 3	0, 197	5
	See section	509(a)(2). (Complete	e Part III)									
10 🗆	An organizat	ion organized and or	perated exclusively to te	st for publ	ic safety S	See sectio	n 509(a)(4	I).				
11 🗀	An organizat	ion organized and or	perated exclusively for th	ne benefit	of, to perfo	rm the fui	nctions of,	or to carr	y out the	purposes o	of one o	or
	more publicly	y supported organiza	ations described in section	on 509(a)(1) or section	on 509(a)(2	2) See sec	tion 509(a	a)(3). Ch	eck the box	that	
	describes the	e type of supporting	organization and comple	ete lines 1	1e through	11h						
	а 🔙 Туре	I b 🗔 Ту	ype II c 🗔 Ty	ype III - Fu	nctionally i	ntegrated	c	і 🔲 Тур	e III - Nor	n-functional	ly integ	ırated
е 🗔	By checking	this box, I certify tha	at the organization is not	controlled	d directly o	r indirectly	by one or	r more disc	qualified	persons oth	ner thar	n
	foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	tions des	cribed in s	ection 509	9(a)(1) or	section 509	(a)(2)	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	ре I, Туре	II, or Type	e III				
		rganization, check th					•					
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the follo	owing pers	sons?			
_	(i) A perso	n who directly or ind	irectly controls, either al	lone or tog	ether with	persons o	described i	ın (ıı) and (ı	ııı) below,	,	Yes	No
	the gov	erning body of the si	upported organization?							11g(i)		
	(ii) A famıly	member of a persor	n described in (i) above?	•						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i) o	or (II) abov	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s)							
(i) Nan	ne of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did yo	u notify the	(vi) ls	the	(vii) Amount	of mon	netary
. ,	ganization	(", "	(described on lines 1-9		sted in your		ion in col.	organizatio) LUI.		port	, o tui y
	-		above or IRC section	governing	document?	(i) of you	r support?	(i) organız U.S	.?	•	•	
			(see instructions))	Yes	No	Yes	No	Yes	No			
				<u> </u>	į .							
				1								
_		-						_				
		-						_	1			
Total												
	Paperwork Re	eduction Act Notice	, see the Instructions f	or	 	•	•	Schedul	e A (Fori	m 990 or 99	10-F7)	2013

332021 09-25-13

Form 990 or 990-EZ.

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")	1959848.	2415877.	1744699.	2706924.	3944241.	12771589.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1959848.	2415877.	1744699.	2706924.	3944241.	12771589.
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)						4227635.
	Public support. Subtract line 5 from line 4						8543954.
Sec	ction B. Total Support	·					·
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1959848.	2415877.	1744699.	2706924.	3944241.	<u>12771589.</u>
8	Gross income from interest,	ì					
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	2,204.	947.	210.	1,781.	1,925.	7,067.
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)	1,057.	8,482.	3,426.	5,618.	2,636.	21,219.
11	Total support. Add lines 7 through 10						12799875.
	Gross receipts from related activities,	•					<u>,964,434.</u>
13	First five years. If the Form 990 is for	_	first, second, thir	d, fourth, or fifth ta	ıx year as a sectioi	n 501(c)(3)	
Sec	organization, check this box and storetion C. Computation of Publ	here ic Support Per	rcentage	<u> </u>			
	Public support percentage for 2013 (I			olumn (f))		14	66.75 %
	Public support percentage from 2012	''	•	\ <i>''</i>		15	69.38 %
16a	33 1/3% support test - 2013. If the c	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright \mathbf{X}$
b	33 1/3% support test - 2012. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes	• •	• • •		e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			•	•	J	ightharpoons
b	10% -facts-and-circumstances tes	-	,		_	7a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	in Part IV how the	•
	organization meets the "facts-and-circ				-		ightharpoons
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s 🕨
				 -	Sche	dule A (Form 990	or 990-EZ) 2013

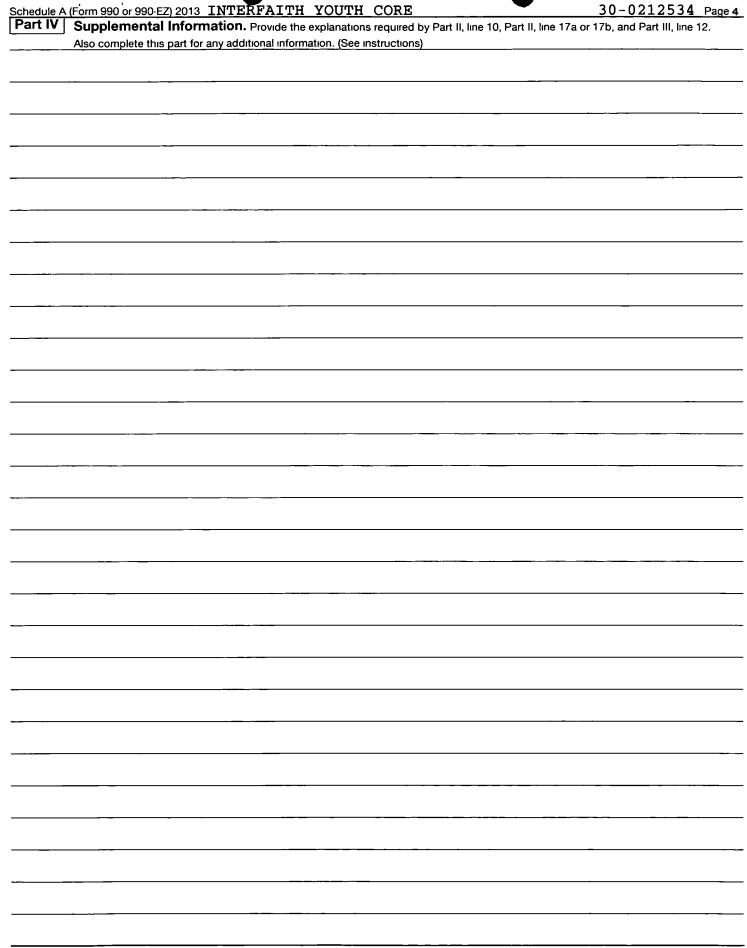
332022 09-25-13

Schedule A (Form 990 or 990 EZ) 2013 INTERFAITH YOUTH CORE 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

Section A. Public Support			····		-	
	(*) 0000	(L) 2010	(-) 0011	4.0.0010	T 43 0010	(D. T-1-1
alendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
, ,						
membership fees received (Do not include any "unusual grants")						
´			_	 		
2 Gross receipts from admissions, merchandise sold or services per-		1				
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose			_	1		
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to					ŧ	
or expended on its behalf				_		
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons			•			
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b				-	<u> </u>	
B Public support (Subtract line 7c from line 6)	·					
ection B. Total Support	 -	l		1		
llendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	(4) 2000	(6) 2010	(6) 2011	(d) 2012	(6) 2010	(i) rotar
Da Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources		-			-	
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975		-				
c Add lines 10a and 10b	 					
1 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on						
Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)				<u>.</u>		
Total support (Add lines 9, 10c, 11, and 12)						
4 First five years. If the Form 990 is for t	he organization'	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organız	ation,
check this box and stop here		-				▶ _
ection C. Computation of Public	Support Pe	rcentage			·	
5 Public support percentage for 2013 (lin	ie 8, column (f) d	ivided by line 13, o	olumn (f))		15	
Public support percentage from 2012 S			_		16	_
ection D. Computation of Invest						
7 Investment income percentage for 201	3 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	
Investment income percentage from 20	012 Schedule A,	Part III, line 17			18	
9a 33 1/3% support tests - 2013. If the c	rganization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	-					►□
b 33 1/3% support tests - 2012. If the c	•	-	•			and
line 18 is not more than 33 1/3%, chec	-				· · · · · · · · · · · · · · · · · · ·	▶□
O Private foundation. If the organization						

332023 09-25-13



SCHEDULE D

(Form 990)

Supplemental Financial Statements

► 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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	INTERFAITH YOUTH C		30-0212534
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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		Yes No
6	Did the organization inform all grantees, donors, and donor a		
·	for chantable purposes and not for the benefit of the donor of		
	impermissible private benefit?	or derior devices, or for any earlier purpose cor	Yes No
Par		panization answered "Yes" to Form 990. Part	
1	Purpose(s) of conservation easements held by the organizat		17, 1110 /
•			really important land area
	Preservation of land for public use (e g , recreation or e	Preservation of a certified	• •
		Preservation of a certified	u historic structure
_	Preservation of open space	f	
2	Complete lines 2a through 2d if the organization held a quali	tied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		_2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	• •	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in	t holds?	└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	ng the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	e year > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4	4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	organization's accounting for
	conservation easements		
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er 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 (AS	SC 958), not to report in its revenue statemen	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	•	·
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS		nd balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e	*	·
	relating to these items		control, provide the renorming dimediate
	(i) Revenues included in Form 990, Part VIII, line 1		L ¢
	(ii) Assets included in Form 990, Part X		► \$ ► \$
•		pactures or other similar secto for financial as	
2	If the organization received or held works of art, historical tre	_	an, provide
	the following amounts required to be reported under SFAS 1	To (MOC 900) relating to these items:	~ •
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		▶ ३
	For Dominional Backgraff - A - A - A - A - A - A - A - A - A -	- for Form 000	0-b-11-B/F - 000 000
LHA	For Paperwork Reduction Act Notice, see the Instruction	IS TOT FORM 990.	Schedule D (Form 990) 2013

332051 09-25-13

		ITH YOUTH					30-02			age 2
Pai	t III Organizations Maintaining C	collections of A	rt, Historica	l Treasures,	or Other	Simil	ar Asse	ts(conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ls, check any o	f the following tha	at are a sig	nificant	use of its	collectio	n item	s
	(check all that apply)									
а	Public exhibition	d	Loan o	exchange progr	ams					
b	Scholarly research	е	Other_							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how they furt	her the organizati	on's exem	pt purp	ose ın Par	t XIII		
5	During the year, did the organization solicit of	r receive donations	of art, historical	treasures, or oth	er sımılar a	ssets	_	_		_
Γ=-	to be sold to raise funds rather than to be ma							<u>Yes</u>		No
Pai	t IV Escrow and Custodial Arran		ete if the organi	zation answered	"Yes" to Fo	orm 990), Part IV, I	ıne 9, or		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contrib	utions or other as	sets not in	cluded	_	_		_
	on Form 990, Part X?							」Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table							
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f		_		
	Did the organization include an amount on Fe							」Yes		No
	If "Yes," explain the arrangement in Part XIII									
Pai	t V Endowment Funds. Complete									
		(a) Current year	(b) Prior yea	ır (c) Two yea	rs back (c) Three y	ears back	(e) Fou	r years	back
1a	Beginning of year balance									
b	Contributions		_							
С	Net investment earnings, gains, and losses				_					
d	Grants or scholarships		 _							
е	Other expenditures for facilities									
_	and programs									
f	Administrative expenses									
9	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balanc	· -	nn (a)) held as						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
•	The percentages in lines 2a, 2b, and 2c should be a second of the second		-A AlA l-	-1-111						
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are no	eid and administe	erea for the	organi	zation	1	.,	
	by.							(a, t)	Yes	No_
	(i) unrelated organizations							3a(i)		
_	(ii) related organizations	hatad as required a	s Cobodulo D2					3a(ii)		
_	If "Yes" to 3a(ii), are the related organizations Describe in Part XIII the intended uses of the							_3b_		
Par	t VI Land, Buildings, and Equipm		winent lunus.							
	Complete if the organization answere		Part IV line 11	la See Form 990	Dart Y lin	a 10				
	Description of property	(a) Cost or o	I	Cost or other		cumulate	ad	/d\ Pac	k vali	
	bescription of property	basis (investr		asis (other)	, , ,	eciation	I	(d) Boo	n valu	-
10	Land	2236 (336)		()	ССР		- 			
	Buildings									
	Leasehold improvements			170,459.		76,2	93	Q	4,1	66
H	Equipment		<u> </u>	92,204.		79,7			$\frac{4}{2}, \frac{1}{4}$	
۵	Other			309,197.		07,4		10		02.
	Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	Y column (B)			<i>,</i> , , , ,	~~	$\frac{20}{10}$		30

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 INTERFAITH	YOUTH CORE		30-0212534 Page
Part VII Investments - Other Securities.	<u> </u>		
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua	tion Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)	_		
(C)		-	
(D)		-	
<u>(E)</u>			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>	·
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" (a) Description of investment	to Form 990, Part IV, line (b) Book value		X, line 13. tion Cost or end-of-year market value
<u>```</u>	(b) BOOK Value	(c) Metriod of Valua	tion Cost or end-or-year market value
(1)		 	
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)	-		
(8)			
(9) Tatal (Col. (b) must squal Form 000. Part V. sel. (P) line 12.)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.		_ <u></u>	
Complete if the organization answered "Yes"	to Form 990 Part IV line	a 11d See Form 990 Part	Y line 15
	Description	e i i d. Oce i omi 930, i art	(b) Book value
(1)			(3)
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		· · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col (B) line			•
Part X Other Liabilities.	,,		
Complete if the organization answered "Yes"	to Form 990, Part IV, line	e 11e or 11f. See Form 990). Part X. line 25.
1. (a) Description of liability		(b) Book value	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. 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 X

Schedule D (Form 990) 2013

(6) (7) (8) (9) Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements 4,611,161. Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 a Net unrealized gains on investments 2a 31,466. b Donated services and use of facilities 2b c Recoveries of prior year grants 2c Other (Describe in Part XIII.) 2d 31,466. Add lines 2a through 2d 2e e 4,579,695. Subtract line 2e from line 1 3 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 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 4,675,190. 1 Amounts included on line 1 but not on Form 990, Part IX, line 25 31,466. a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c Other (Describe in Part XIII) 2d 31,466. e Add lines 2a through 2d 2e 4,643,724. Subtract line 2e from line 1 3 3 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

Part XIII Supplemental Information.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

b Other (Describe in Part XIII.)

c Add lines 4a and 4b

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

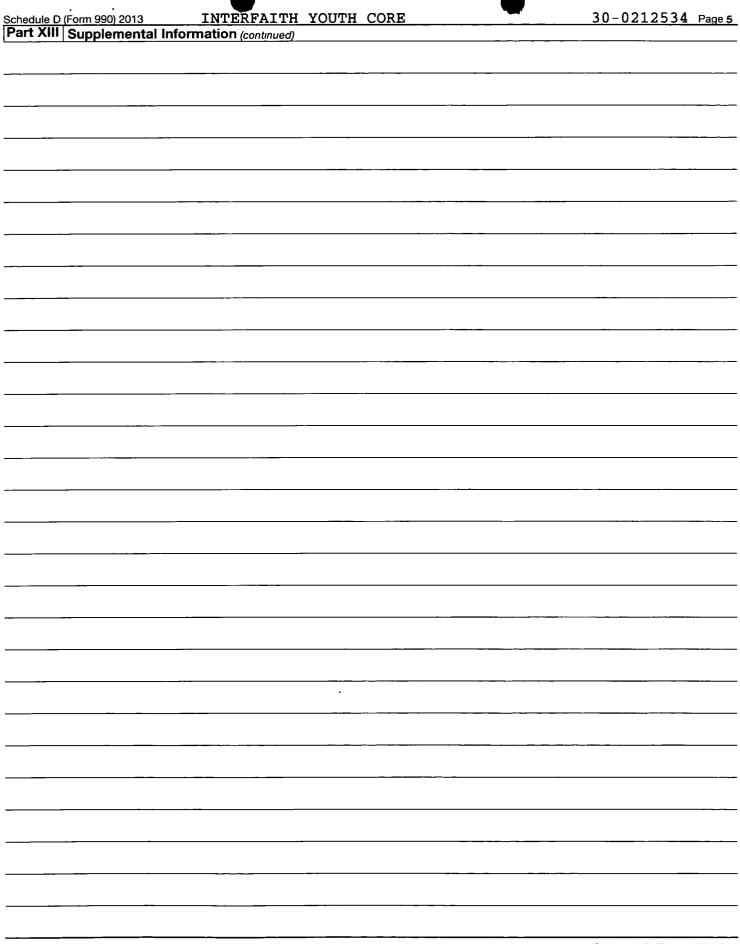
4b

4c

4,643

PART X, LINE 2:

EXPLANATION: THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN ARE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE LIKELY THEN NOT, BASED ON THE TECHNICAL MERITS, THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION. AS OF JULY 31, 2014, IFYC HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FEDERAL AND STATE TAX RETURNS OF IFYC FOR TAX YEARS 2010, 2011, AND 2012 ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE AND STATE TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED.



SCHEDULE I (Form 990) Department of the Treasury

Internal Revenue Service

Governments, and Individuals in the United States

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

▶ Attach to Form 990.

OMB No 1545-0047	2013	Open to Public Inspection

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

14. **2** Employer identification number 30-0212534 TO PILOT THE INSTRUMENTS TO PILOT THE INSTRUMENTS AND RECRUIT SCHOOLS FOR ND RECRUIT SCHOOLS FOR EQUENCES IN INTERFAITH SEQUENCES IN INTERFAITH EQUENCES IN INTERFAITH SEQUENCES IN INTERFAITH DEVELOPMENT OF COURSE DEVELOPMENT OF COURSE DEVELOPMENT OF COURSE DEVELOPMENT OF COURSE (h) Purpose of grant or assistance X Yes O SUPPORT THE TO SUPPORT THE TO SUPPORT THE TO SUPPORT THE Grants and Other Assistance to Governments and Organizations in the United States. Complete of the organization answered "Yes" to Form 990. Part IV, line 21, for any TUDIES, STUDIES, TUDIES TUDIES DEALS. DEALS. 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) ା ં Ö Ö ᅴ ં (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed 8 000. 000 8 000 152,740 (d) Amount of 178,777 cash grant 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ω. (c) IRC section if applicable 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) Enter total number of other organizations listed in the line 1 table CORE 36-2722198 13-5562308 56-6001393 95-2962604 94-1156599 23-1352632 INTERFAITH YOUTH General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization NORTH CAROLINA STATE UNIVERSITY CALIFORNIA LUTHERAN UNIVERSITY or government 726 BROADWAY, 7TH FLOOR CA 91360 ELIZABETHTOWN, PA 17022 RALEIGH, NC 27695-7313 BENEDICTINE UNIVERSITY ELIZABETHTOWN COLLEGE NEW YORK UNIVERSITY Name of the organization NEW YORK, NY 10003 ST. MARYS COLLEGE 1000 HARRIS HALL MORAGA, CA 94575 ONE ALPHA DRIVE 5700 COLLEGE RD LISLE, IL 60532 THOUSAND OAKS P.O. BOX 4557 60 W OLSEN RD Part II Part

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

Schedule I (Form 990) (2013)

Page 1

(a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONCORDIA COLLEGE 901 8TH STREET SOUTH MOORHEAD, MN 56562	41-0693977	501 (C)(3)	8,000	• 0		:	TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES.
DOMINICAN UNIVERSITY 7900 W DIVISION STREET RIVER FOREST, IL 60305	36-2167855	501 (C)(3)	8,000,	0			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES.
LOYOLA UNIVERSITY 1032 W SHERIDAN ROAD CHICAGO, IL 60660	36-1408475	501 (C)(3)	8,000.	• 0			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES,
DREW UNIVERSITY 36 MADISON AVENUE MADISON, NJ 07940	22-1487164	501 (C)(3)	8,000	0			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES.
UNIVERSITY FOUNDATION - CALIFORNIA STATE CHICO - 400 W, FIRST STREET - CHICO, CA 95929-0740	95-1230865	501 (C)(3)	8,000	0			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES,
UNIVERSITY OF LA VERNE 1950 THIRD STREET LAVERNE CA 91750	95-1644026	501 (C)(3)	2 000	o			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES.
ELON UNIVERSITY 100 CAMPUS DRIVE ELON, NC 27244	56-0562303	501 (C)(3)	2,000	• 0			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES,
UNIVERSITY OF TOLEDO FOUNDATION 2801 W BANCROFT ST., MS 318 TOLEDO, OH 43606-3395	34-6555110	501 (C)(3)	8,000	*0			TO SUPPORT THE DEVELOPMENT OF COURSE SEQUENCES IN INTERFAITH STUDIES.
							Schedule I (Form 990)

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INTERFAITH YOUTH CORE Schedule I (Form 990) (2013)

Page 2

30-0212534

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
BETTER TOGETHER: ALL ACROSS THE COUNTRY STUDENTS ARE TAKING ACTION TO MAKE INTERFAITH COOPERATION A PRIORITY THROUGH THE BETTER TOGETHER CAMPAIGN. AT THE END OF THE SCHOOL VEAR IFYC GIVES AWARDS TO	oc.	3 660	C		
ALUMNI: IFYC ADVANCES INTERFAITH COOPERATION IS BY AWARDING PROFESSIONAL DEVELOPMENT FUNDS TO ALUMNI WHO ARE COMMITTED TO ADVANCING THEIR PERSONAL AND PROFESSIONAL INTERFAITH LEADERSHIP, IFYC AWARDS	16	, 60 60 60 60 60 60	o		
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	urred in Part I, line	2, Part III, column	(b), and any other ad	ditional information	

LINE 2: PART I, EXPLANATION: IFYC AWARDS MINI GRANTS TO ORGANIZATIONS FOR PROJECTS &

IFYC REQUIRES MINI INITIATIVES DESIGNED TO FOSTER RELIGIOUS PLURALISM. GRANT RECIPIENTS TO SUBMIT PROJECT REPORTS THAT EXPLAIN HOW GRANT FUNDS

WERE SPENT AND UTILIZED.

A.ALUMNI MINI GRANTS:

I. IFYC AWARDS MINI GRANTS TO ORGANIZATIONS FOR PROJECTS AND

INITIATIVES DESIGNED TO

332102 10-29-13

IFYC FOSTER RELIGIOUS PLURALISM.

SEE PART IV FOR COLUMN (A) DESCRIPTIONS

332291 05-01-13

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information



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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

► Attach to Form 990. ► See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization

INTERFAITH YOUTH CORE

Employer identification number

30-0212534

Pa	irt Questions negarding compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on 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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
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			
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
4				
_	organization or a related organization	4-		v
a	Receive a severance payment or change-of-control payment?	4a		X
D	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		$\frac{\Lambda}{X}$
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			i
	Only section 501(c)(3) and 501(c)(4) organizations 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:			
	The organization?	5a		X
b	Any related organization?	5b		X
	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			
а	The organization?	6a		X
b	Any related organization?	6b		X
	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		X
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		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2013

Page 2

INTERFAITH YOUTH CORE

Schedule J (Form 990) 2013

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·()(B)	reported as deferred in prior Form 990
(1) EBRAHIM PATEL	ε	221,847.	0	0.	0	10,202.	232,049.	0
NDER AND PRESIDENT	€	4	0.	0.		0	0	0
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Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

	INTERFAITH YOUTH CORE					30-0212534			
Pai	t 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 d noncash contrib	etermını	_	s	
1	Art - Works of art					<u>-</u>			
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	X	3	176,888.	SELLING PRI	CE			
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								
25	Other • ()								
26	Other			,					
27	Other • ()								
28	Other ()			<u> </u>					
29	Number of Forms 8283 received by the organi								
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement 29	-				
							Yes	No	
30a	During the year, did the organization receive b	y contributio	on any property rep	ported 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 i	required to be used for exer	npt purposes for				
	the entire holding period?					30a		<u> </u>	
	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 or	ganızatıons to solı	cit, process, or sell noncash	1		İ		
	contributions?					32a		X	
b	If "Yes," describe in Part II.								
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is cl	necked,				
	describe in Part II								

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

Schedule M (Form 990) (2013)

chedule M	(Form 990) (2013)	INTERFAITH	HTUOY	CORE		3	<u> 10-0212534</u>	Page 2
Part II	Supplemental is reporting in Part this part for any actions and the supplemental in th	I Information. Pro t I, column (b), the nur dditional information	vide the info nber of conti	rmation required by ributions, the numb	y Part I, lines 30b, 32l per of items received,	o, and 33, and or a combina	d whether the orgai tion of both Also c	nization omplete
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2142 09-03-	13						Schedule M (For	m 990) (201

SCHEDULE 0

(Form 990 or 990-EZ)

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Name of the organization INTERFAITH YOUTH CORE	Employer identification number 30-0212534	
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:	
SIGNIFICANT ACTIVITIES INCLUDE: CAMPUS PARTNERSHIPS, LEA	DERSHIP AND	
COMMUNICATIONS.		
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHME	NTS:	
AND RELIGIOUS AND INTENTIONALLY SECULAR COMMUNITIES.		
-338 CAMPUSES IN PROACTIVE AND REGULAR RELATIONSHIP WITH	IFYC. 86% OF	
THE ACTIVE CAMPUSES IN THE CAMPUS STEWARDSHIP SYSTEM HAVE	EXPERIENCED	
SOME LEVEL OF INSTITUTIONAL CHANGE OVER THE PAST YEAR. W	HILE 78% OF	
THOSE CAMPUSES DEMONSTRATED GROWTH WITHIN ONE CONSTITUENC	Y LAYER	
(ADMINISTRATION, STAFF, STUDENTS, ETC.) AN IMPRESSIVE 40%	OF CAMPUSES	
ALSO DEMONSTRATED GROWTH ACROSS MORE THAN ONE CONSTITUENC	Υ.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHME	NTS:	
-IFYC HAS MOVED QUICKLY TO LAUNCH PLANNING FOR THE NEW LO	NGITUDINAL	
RESEARCH STUDY, RECENTLY NAMED THE INTERFAITH DIVERSITY E	XPERIENCES AND	
ATTITUDES LONGITUDINAL SURVEY (IDEALS).		
-IFYC CONTRACTED AND COMPLETED 14 ON-CAMPUS CONSULTATIONS	•	
CONSULTATIONS RANGED FROM MULTI-YEAR PARTNERSHIPS WITH CA	MPUSES	
INVESTING IN INTERFAITH COOPERATION AT THE HIGHEST LEVEL	TO	
INTRODUCTORY TRAININGS FOR CMPUSES IN INITIATION STAGES.		
-RESPONDED TO DATA FROM THE FIELD. WHICH INDICATES THAT C	AMPUSES DESTRE	

THEREFORE, PLANNED FOR AND

A MORE CONTEXTUAL AND TAILORED APPROACH.

37

-IFYC'S NEW ONLINE RESOURCE, COMMON KNOWLEDGE: A PODCAST ABOUT

INTERFAITH LITERACY, AIMS AT IFYC'S HIGHER EDUCATION CONSTITUENCIES,

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization Employer identification number INTERFAITH YOUTH CORE 30-0212534 YET ALSO PROMOTES INTERFAITH LITERACY AMONG A MORE GENERAL AUDIENCE AS WELL. THE FIRST 5 EPISODES LOGGED AN IMPRESSIVE 2,117 LISTENS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: EXECUTIVE OFFICE - PROVIDES INSPIRATION AND THOUGHT LEADERSHIP TO THE INTERFAITH MOVEMENT. -EBRAHIM PATEL, FOUNDER AND PRESIDENT, SPOKE AT 27 CAMPUSES, SPANNING A WIDE RANGE OF SCHOOLS, INCLUDING THE PRIVATE, RELIGIOUSLY AFFILIATED UNIVERSITIES OF BRIGHAM YOUNG AND SANTA CLARA; PRIVATE, NON-SECTARIAN UNIVERSITIES INCLUDING DUKE AND NORTHEASTERN; AND PUBLIC RESEARCH UNIVERSITIES LIKE GEORGIA TECH AND THE UNIVERSITY OF OKLAHOMA. MORE THAN ONE DOZEN ADDITIONAL HIGH-IMPACT SPEAKING ENGAGEMENTS INCLUDED YOUNG PRESIDENTS ORGANIZATION, ATLANTIC PHILANTHROPIES ALL-STAFF CONFERENCE, HILLEL INTERNATIONAL'S RENAISSANCE GALA, AND THE ASSOCIATION OF JESUIT COLLEGES AND UNIVERSITIES. -EBOO ADDRESSED THE 2014 INTERFAITH UNDERSTANDING CONFERENCE AT AUGUSTANA COLLEGE IN ROCK ISLAND, IL, A GATHERING OF PRESIDENTS AND OTHER HIGH-LEVEL DELEGATIONS FROM ELCA COLLEGES AND UNIVERSITIES. -CONTRIBUTED A CHAPTER CALLED "YOUTH AND INTERFAITH CONFLICT TRANSFORMATION" TO THE OXFORD HANDBOOK ON RELIGION AND PEACEBUILDING (FORTHCOMING, 2014; R. SCOTT APPLEBY, DAVID LITTLE, AND ATALIA OMER, EDS.). EXPENSES \$ 376,243. INCLUDING GRANTS OF \$ 3,109. REVENUE \$ 40,534. FORM 990, PART VI, SECTION A, LINE 2:

Schedule O (Form 990 or 990-EZ) (2013)

INTERFAITH YOUTH CORE

EXPLANATION: SUSAN AND RICHARD KIPHART ARE BOTH ON THE BOARD OF DIRECTORS

AND ARE HUSBAND AND WIFE.

S.A. IBRAHIM AND WINSTON IBRAHIM ARE FATHER AND SON.

ANDREA AND ALAN SOLOW ARE MARRIED.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE 990 WILL BE DISTRIBUTED TO ALL OF THE BOARD MEMBERS VIA

E-MAIL PRIOR TO FILING WITH THE IRS. THE FINANCE COMMITTEE WILL REVIEW THE

TAX RETURN AND AUTHORIZED INDIVIDUALS WILL SIGN THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: EACH BOARD MEMBER IS ASKED TO COMPLETE AN ANNUAL CONFLICT OF

INTEREST STATEMENT TO DISCLOSE ANY KNOWN CONFLICTS OF INTEREST. ALL

STATEMENTS SHALL BE REVIEWED BY THE BOARD AS APPROPRIATE.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: EACH FISCAL YEAR THE BOARD REVIEWS THE COMPENSATION OF THE FOUNDER AND PRESIDENT. COMPENSATION IS SET AFTER REVIEW OF COMPARABLE DATA AT OTHER ORGANIZATIONS AND AN ASSESSMENT OF THE FOUNDER AND PRESIDENT'S PERFORMANCE. THE FINANCE COMMITTEE CONDUCTS THIS ANALYSIS.

THE BOARD APPROVES THE BUDGET, WHICH INCLUDES COMPENSATION LEVELS FOR ALL STAFF.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: IFYC'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE

GENERAL PUBLIC ON ITS WEBSITE. GOVERNING DOCUMENTS AND THE CONFLICT OF

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09-04-13
Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization INTERFAITH YOUTH CORE	Employer identification number 30-0212534
INTEREST POLICY ARE AVAILABLE UPON REQUEST.	