

Form 990

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2017
Open to Public Inspection

<u> </u>	Fort	he 2017 caler	ndar year, or tax year beginning and ending										
В	Chec	k if applicable	C Name of organization Young Americans for Liberty	y Foundation	D Emplo	oyer identification number							
	Addre	ss change	Doing business as		<u>45-3503672</u>								
	Name	change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	hone number							
Ħ	Initial	return	P.O. Box 17560		(703)	879-5159							
Ħ	Final re	turn/terminated	City or town, state or province, country, and ZIP or foreign postal code	<u> </u>	1								
Ħ		ded return	Arlington, VA 22216		G Gross	receipts \$ 2 , 788 , 983 .							
Ħ		tron pending	F Name and address of principal officer Cliff Maloney	H(a)		return for subordinates? Yes No							
ш	, фр.,	aon penang	P.O. Box 17560 Arlington, VA 22216			rdinates included? Yes No							
						h a list (see instructions)							
_			X 501(c)(3)	<del></del>		, ,							
			yaliberty.org			ption number							
		f organization Summa		Year of formation 2011	.   M	State of legal domicile VA							
	_	-	-	·									
	1	•	nbe the organization's mission or most significant activities										
ဦ	1		seeks to recruit, train, and educat	<u>e students c</u>	n the	e ideals of							
Activities & Governance	liberty and the Constitution.												
Ver	2		box $lacktriangle$ If the organization discontinued its operations or disposed of m	nore than 25% of its net a	ssets	_							
ဖွ	3		voting members of the governing body (Part VI, line 1a)		. 3	5							
95	4	Number of I	ndependent voting members of the governing body (Part VI, line 1b)		. 4	5							
ţį	5	Total number	er of individuals employed in calendar year 2017 (Part V, line 2a)	-	5	0							
Έ	6	Total number	er of volunteers (estimate if necessary)		. 6	2500							
Ä	7a	Total unrela	ted business revenue from Part VIII, column (C), line 12		7a	0.							
	b	Net unrelate	ed business taxable income from Form 990-T, line 34		7b	0.							
				Prior Year		Current Year							
	8	Contribution	ns and grants (Part VIII, line 1h)	. 1,903,	596.	2,755,740.							
9	9	Program se	rvice revenue (Part VIII, line 2g)										
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)	15,	671.	-593.							
è	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	•		2,103.							
_			ue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,919,	267.	2,757,250.							
	13		similar amounts paid (Part IX, column (A), lines 1-3)										
	14		d to or for members (Part IX, column (A), line 4)			· •							
	15	-	ner compensation, employee benefits (Part IX, column (A), lines 5-10)	738,	030								
Ses		•	If fundraising fees (Part IX, column (A), line 11e)		750.								
ű			alising expenses (Part IX, column (D), line 25) 436, 132		730.								
Expenses			nses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,612,	572	2,836,740.							
_			ses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,366,		2,836,740.							
	19	•	ss expenses Subtract line 18 from line 12	-447,		-79,490.							
		TYCYCHUC IC	s expenses outstact line to nontline 12	Beginning of Curre		End of Year							
ets or lances	20	Total assets	(Part X, line 16)	1,416,		1,762,910.							
8 B			•	1,410,	220.	122,101.							
E de			es (Part X, line 26) .  or fund balances Subtract line 21 from line 20	1 416	220.	1,640,809.							
Đ.			DI1-		220.1	1,040,609.							
			ury, I declare that I have examined this return, including accompanying schedules		boot of my	knowledge and belief it is							
			lete Declaration of preparer (other than officer) is based on all information of whi			knowledge and belief, it is							
1100	, соп	ect, and comp	11 00 1	2018 13 T		0-10							
e:	<u>_</u> _	Signatur	e of officer NOV 14	1021		8-18							
	gn		ESIDENT, CLIFF MALONEY Jr.		•								
He	#e		print name and title	<del>\. UT</del>									
_			nt/Type preparer's name Preparer's signature	Date /	05	T IF PTIN							
Pa		L -		11/8/2018	Check self-en	(A) "							
	epa		Royer	1 1/ / 2018		P01982789							
Us	ie O	- 1				47-2767168							
			address ► 3505 Spring Lake Terrace		опе по	16 1016							
			fax, VA 22030	(7	<u>U3)34</u>	46-1846							
May	the II	RS discuss t	his return with the preparer shown above? (see instructions)	· <u> </u>	<u> </u>	X Yes No							

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Form <b>990</b> (2017)

ABODMR

Form 990 (2017) Young Americans for Liberty Foundation
Part IV Checklist of Required Schedules

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Par	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)? If "Yes,"			
·	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		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		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		X
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	İ		
	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		X
10	Did the organization, directly or through a related organization, hold assets in temporanly restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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	<u> </u>		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		<u> </u>
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	l		
	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	l		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	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	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	404		v
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	446		v
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	_	X
ış	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	45		v
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	$\vdash$	X
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		<u> </u>
"	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		
.5	MENUTER III COMPARIAN CONTRACTOR OF THE STATE OF THE STAT	19		x
UYA	ir Yes, complete Scriedule G, Part III		- 990	(2017)

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Part IV Checklist of Required Schedules (continued) Yes No 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . . 20a X **b** If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II . . . X 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 24 a 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 X through 24d and complete Schedule K If "No," go to line 25a 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 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25a 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? X 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or X 26 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 X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 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) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b 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 . X 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . . 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X X 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? ...... 35a 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 . . . . . . . 35b 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 . . X . . . . . . . . . 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37 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 . . . . X 38

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	Check if Schedule O contains a response or note to any line in this Part V				. 🔲
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	4	NI W		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			311
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?		1c_	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				排鑽
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. \	2b		L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
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		<u> </u>
4 a	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				l
	account)?		4a	aller, 42 m/s	X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts		E HE		
	(FBAR)				
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	•	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		١.		
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		۱		
_	gifts were not tax deductible?	•	6b	-350700432	Serbbook
7	Organizations that may receive deductible contributions under section 170(c).		5000 A		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		7-	<i>701</i>	X
_	and services provided to the payor?	• •	7a 7b		┢┻
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	• •	10		$\vdash$
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	0	10.00		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	20.00 L	X
e f	Did the organization, during the year, pay premiums, directly or indirectly, no a personal benefit contract?	•	7f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	7	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098		7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		34 Ea	<b>13</b> 132	3.20
•	sponsoring organization have excess business holdings at any time during the year?.		8	- Almana	1000
9	Sponsoring organizations maintaining donor advised funds.		5.534		THE CHIEF
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoning organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter		We		砂辆
а	Initiation fees and capital contributions included on Part VIII, line 12				្ត្រាំ ស្ត្រី។ ស្ត្រី ស្ត្រី
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter		6.3		
а	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources				ar s
	against amounts due or received from them )				100.00
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
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				
C	Enter the amount of reserves on hand		p)		466
14 a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		<u> </u>

Part	90 (2017) Young Americans for Liberty Foundation 45-35  VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "		12	age (
· uit	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			X
Sect	ion A. Governing Body and Management	•		<u> </u>
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year   1a	S TANKS	32E	THE S
	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	79.0		
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
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		Ī. —	
	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
7 a	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,			ŀ
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		400	
	the year by the following	<b>M</b>		
а	The governing body?	8a	X	L
þ	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,	<u> </u>	X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
40	D. H	40-	Yes	No.
10 a	Did the organization have local chapters, branches, or affiliates?	10a	-	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	405		
44 -	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	v	-
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>X</b>	- 14,000
12 a	Describe in Schedule O the process, if any, used by the organization to review this Form 990  Put the organization have a watten conflict of interest polycy? If "No." and to line 13	12a		X
12 a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	<del> </del>	^
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	<del> </del>	<del> </del>
С	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	<del> </del>	x
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	Y
15	Did the process for determining compensation of the following persons include a review and approval by	0 m 37	7. T) 1. T	\$ #34
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			23
а	The organization's CEO, Executive Director, or top management official	15a	0.0566010	X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1-24 14 7 12		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	10.4		
	with a taxable entity during the year?	16a	1000000	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100 / 100 m	14673	dr.
_	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?	16b		
Sect	ion C. Disclosure	1	·	
17	List the states with which a copy of this Form 990 is required to be filed ▶			
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)			
	available 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			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records > (703)	346	-18	46
_	Kyle Royer P.O. Box 17560 Arlington, VA 22216			

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Form 990 (2017)

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.	 			

### 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 definintion 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 in		ted or	raar	nıza	tıon	com	oen:	sated anv curr	ent officer, direc	tor, or trustee
			3	(0						.,
(A)	(B)			Posi	•			(D)	(E)	(F)
Name and Title	Average	(do n				than o	ne	Reportable	Reportable	Estimated
	hours per	1				ıs both		compensation	compensation from	amount of
	week (list any					or/truste		from	related	other
	hours for		_		_			the .	organizations	compensation
	related organizations	d N	stit	Officer	Key employee	[ 퓙호	Former	organization	(W-2/1099-MISC)	from the
	below dotted	ecto	ţ	4	ğ	yer c	역	(W-2/1099-MISC)		organization and related
	line)	֓֞֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	la t		l oye	۳ğ				organizations
		Individual trustee or director	Institutional trustee		°	Pen				
			8			Highest compensated employee				
								, -		
(1) Jeff Frazee	1									
Board Chair/Treasurer	1	Х		X				0	0	0
(2) Kevin Martin	1							_		
Director	1	X	L		_			0	0	0
(3) Larry Reed	1									_
Director		X	<u> </u>	L	<u> </u>	ļ	<u> </u>	0	0	0
(4) Katey Roberts	1									_
Director			<u> </u>	X				0	0	0
(5) Cliff Maloney	32				l					
President	8		<u> </u>	X	<u> </u>	ļ		0	83,750.	2,179.
(6)										
(3)			$\vdash$			-				
(7)					Ì					
(0)			$\vdash$		┝					
(8)										
(9)			$\vdash$	$\vdash$	┝					
	-									
(10)										
			_							
(11)										
(12)										
7:-/										
(13)								-		
(14)										
			L							

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received more than \$100,000 of compensation from the organization▶

	Statement of Revenue
1525111574111	Statement of Revenile
	Otatement of iterende

		Check if Schedule O contains			Part VIII	<u> </u>		<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
Gifts, Grants lar Amounts	1a b c d	Federated campaigns  Membership dues	. 1a 1h 1c 1d		The state of the s			
Contributions, Gifts, Grants and Other Similar Amounts	f g	Covernment grants (contributions) all other contributions, gifts, g and similar amounts not include Noncash contributions include	rants, ded above 1f					
	h	Total. Add lines 1a–1f	• •	Business Code	2,755,740.			
Program Service Revenue	2a b c d			Business code			S. Weinin School of the Company of t	
Prog	١ ١	All other program service reve Total. Add lines 2a-2f		▶	<del> </del>		**************************************	
	3	Investment income (including and other similar amounts) Income from investment of tax	dıvidends, interest		126.	as 2000mp of the Color and State Colors for State	20:3 27 Colombia Balance (April 1988) 1 Mary	126.
	5 6a	Royalties	(ı) Real	(II) Personal				
	b c	Less rental expenses			S. S	Provide Aller Constitution of the Constitution	enter de la companya	
	7 a	Gross amount from sales of assets other than inventory Less cost or other basis	(i) Securities 31,014.	(ii) ∩ther	chrydormonionminaminaminamina Veniglyggyddyddiai	obiographic service de la companya d		
		and sales expenses .  Gain or (loss) .  Net gain or (loss)	31,733. -719.	•	-719			And the second s
Revenue		Gross income from fundraisin events (not including \$	g					
Other R		of contributions reported on lin See Part IV, line 18 Less: direct expenses	a			Turnelle de la companya de la compan		
	9a	Net income or (loss) from fund Gross income from gaming at See Part IV, line 19 Less direct expenses	ctivities . a					
`	с 10 а	Net income or (loss) from gan Gross sales of inventory, less returns and allowances	a a	. •	dami damin daplandani da damin daplandani ang daplandanida	Section of the control of the contro		nemananggapper
	С	Net income or (loss) from sale Miscellaneous Fevenue Other Income		Businoss Code	2,103.		Aumanos appropriate and a second and a secon	2,103.
	b c					COLORGANICO ANNO ANNO ANNO ANNO ANNO ANNO ANNO AN	LAND CROSS SIGN	- / ± 0 J .
	e 12	Total Add lines 11a-11d .  Total revenue. See instruction			2,103. 2,757,250.			2,229.

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 or note to any line in this Part IX. (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, Program service Management and Fundraising and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21". Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, , .`. lines 15 and 16 4 Benefits paid to or for members \* 5 Compensation of current officers, directors, trustees, and key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salanes and wages Pension plan accruals and contributions (include section ~401(k) and 403(b) employer contributions) Other employee benefits . . 10 Payroll taxes . Fees for services (non-employees) a Management . 14,750 14,750 **b** Legal. 43,628. 28 43,600 C Accounting . . . **d** Lobbying e Professional fundraising services See Part IV, line 17 3,731 3,731. 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) 166,490 6,888 85,167 74,435. 8,443. 8,419. Advertising and promotion 419,526. 230,049. 22,885 166,592. Office expenses . Information technology. 17,917. 13,174 4,558 185. 15 Royalties . 4,201 16 6,341 2,140 Occupancy 35,104 168,786. 132,408 1,274 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 614,699 612,876 488 20 21 Payments to affiliates Depreciation, depletion, and amortization 6.538. 5,051 Insurance. 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) Payments to related entity 792,665. 614,036. 157,989 Student Leadership Program Direct Expenses 573,226. 573,226. e All other expenses 2,836,740, 2,198,295. 202,313. 436,132 Total functional expenses. Add lines 1 through 24e 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)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 897.464 1,180,222. Cash — non-interest-bearing. . 1 257,244. 256,644 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 11,381 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees Complete Part II of Schedule L 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) 6 Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use . . 47,106 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a **b** Less accumulated depreciation . . . 278,338 250,731 11 11 Investments — publicly traded securities 12 Investments — other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets . . 15 15 Other assets See Part IV, line 11. 1,762,910. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 110,669. 17 Accounts payable and accrued expenses 18 18 Grants payable 19 11,432 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D. 21 The Section of the Williams 200 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. . 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 . . . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities 25 not included on lines 17-24) Complete Part X of Schedule D. . 25 Total liabilities. Add lines 17 through 25 26 122,101 or Fund Balances Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 416,220 27 Unrestricted net assets 27 634,809 28 Temporarily restricted net assets . 28 6,000 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Net Assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds

. .

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33

Total net assets or fund balances . . .

Total liabilities and net assets/fund balances

Form 990 (2017)

1,640,809.

1,762,910.

416,220. 33

416,220. 34

Form 99	0 (2017) Young Americans for Liberty Foundation	45-3 <u>5</u>	<u>03672</u>	Page 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>		. <b>X</b>
1	Total revenue (must equal Part VIII, column (A), line 12)	1 :	2,757	<u>,250.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,836	<u>,740.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	-79	<u>,490.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,416	<u>,220.</u>
5	Net unrealized gains (losses) on investments	5	29	<u>,864.</u>
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	274	<u>,215.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	io] :	1,640	<u>,809.</u>
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Y	es 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 O			
2 a	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 2	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate ba	sis, consolidated		
	basis, or both			
	■ Separate basis □ Consolidated basis □ Both consolidated and separate basis			
c	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?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
3 a	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	X
þ	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	
UYA			Form 9	90 (2017)

## **SCHEDULE A**

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs gov/Form990 for instructions and the latest information

Inspection
Employer identification number

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Young Americans for Liberty Foundation

45-3503672

	<u> </u>	4 MUCTICANS FOR HI	Derey rou	1100 01011			10 000012					
Pa	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.											
The	orga	anization is not a private founda	ition because it i	s (For lines 1 through	h 12, che	ck only o	ne box.)					
1	$\Pi$	A church, convention of church	nes, or association	on of churches descri	bed in se	ction 17	0(b)(1)(A)(i).	$\kappa_{\nu}$				
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ) )											
3	Ħ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
Ā	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the											
7	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											
3	section 170(b)(1)(A)(iv). (Complete Part II)											
		A federal, state, or local govern		montal unit december	lun coeti	on 170/h	\/4\/A\/ <sub>2</sub> \					
0	닖	_	-					ha ganaral nublia				
7	A	An organization that normally i			ort morn a	a governi	nental unit of hom t	ne general public				
_	_	described in section 170(b)(1)			D-4111							
8	닏	A community trust described in						1				
9	Ш	An agricultural research organ										
		or university or a non-land-gra	nt college of agr	iculture (see instruction	ons) Enti	er the hai	me, city, and state o	or the college or				
	_	university			<del>.</del>							
10	Ш	An organization that normally receipts from activities related	receives: (1) moi	re than 33 1/3% of its	support	rom con	tributions, members nd (2) no more than	nip rees, and gross				
		support from gross investment	income and uni	related business taxal	ble incom	ie (less s	ection 511 tax) from	businesses				
	_	acquired by the organization a	fter June 30, 197	75 See <b>section 509</b> (	<b>a)(2).</b> (Co	omplete F	Part III.)					
11	$\sqcup$	An organization organized and	•	•	-							
12		An organization organized and										
		one or more publicly supported										
		the box in lines 12a through 12	2d that describes	s the type of supporting	ig organi	zation an	d complete lines 12e	e, 12f, and 12g				
a	۱ [	Type I. A supporting organiz	ation operated,	supervised, or control	led by its	supporte	ed organization(s), ty	ypically by giving				
		the supported organization(s	) the power to re	egularly appoint or ele	ct a majo	rity of the	e directors or trustee	es of the supporting				
		organization You must com	iplete Part IV, S	Sections A and B.								
t	<b>,</b> [	Type II. A supporting organiz	zation supervised	d or controlled in coni	nection w	ıth ıts suj	pported organization	n(s), by having				
		control or management of the	e supporting org	anization vested in th	e same p	ersons th	hat control or manaç	ge the supported				
		organization(s) You must co	omplete Part IV	, Sections A and C.								
•	; [	Type III functionally integra	ated. A supportin	ng organization opera	ted in co	nnection	with, and functional	ly integrated with,				
		its supported organization(s)	(see instruction	s) You must comple	te Part I	V, Sectio	ns A, D, and E.					
(	1	Type III non-functionally in	tegrated. A sup	porting organization of	perated	in connec	ction with its suppor	ted organization(s)				
		that is not functionally integra	ated. The organi	zation generally must	satisfy a	distribut	on requirement and	an attentiveness				
		requirement (see instructions	s) You must co	mplete Part IV, Secti	ions A a	nd D, and	d Part V.					
•	<b>,</b> [	Check this box if the organization	ation received a	written determination	from the	IRS that	it is a Type I, Type	II, Type III				
	_	functionally integrated, or Ty						•				
1		Enter the number of supported of	•									
	<b>,</b> F	Provide the following information	about the supp	orted organization(s)								
		Name of supported organization	(ii) EIN	(III) Type of organization	(iv) is the	rnanization	(v) Amount of monetary	(vi) Amount of				
	• • •		. ,	(described on lines 1-10	listed in you	ır governing	support (see	other support (see				
				above (see instructions))	docu	ment?	instructions)	instructions)				
					Yes	No						
							·					
(A)						1						
			-			1						
(B)												
(C)												
(0)												
(D)												
·												
(E)												
<del>-</del>	•											

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.)

<u>Secti</u>	on A. Public Support	_					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						ĺ
	include any "unusual grants ")	912,163.	1,880,783.	3,145,752.	1,903,596.	2,7 <u>55,740.</u>	10,598,034.
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	912,163.	1,880,783.	3,145,752.	1,903,596.	2,755,740.	10,598,034.
5	The portion of total contributions by						
	each person (other than a				F212-707-70		
	governmental unit or publicly					7.0	
	supported organization) included on			377 S			
	line 1 that exceeds 2% of the amount					To the state of	
	shown on line(11, column (f)				GEOGRAPHICAL STATE		5,129,643.
6	Public support. Subtract line 5 from line 4	THE SECOND	Militar Million (19)	COMMENCE OF STREET, ST	LE PROPERTY DE		5,468,391.
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	912,163.	1,880,783.	3,145,752.	1,903,596.	2,755,740.	10,598,034.
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar						ŧ
	sources	5.	47.	13,093.	15,671.	29,271.	<u>58,087.</u>
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		ł				1
	(Explain in Part VI)						ļ
11		325 A 7 25				T Y	10,656,121.
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the	-	's first, second	l, third, fourth,	or fifth tax yea	r as a section	501(c)(3)
	organization, check this box and stop he					· · · · · · · ·	· · · • • L
	on C. Computation of Public Suppo			44 1 (6)			<b>54 00%</b>
14	Public support percentage for 2017 (line					14	51.32%
15	Public support percentage from 2016 Sc					15	49.61%
16a	33 1/3 % support test-2017. If the organ						
	box and stop here. The organization qua			_			
b	33 1/3 % support test-2016. If the organ					is 33 1/3 % or	more,
	check this box and stop here. The organ	•			-	400	·
17a	10%-facts-and-circumstances test-20						
	10% or more, and if the organization me						
	Part VI how the organization meets the "f			•	•	•	· · ·
_	_						
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization n				-	•	
4.5	supported organization						
18	Private foundation. If the organization of						_
	instructions	<u> </u>			<u></u>	<u>.</u>	🕨

Schedul Part	e A (Form 990 or 990-EZ) 2017 Young Ame  Support Schedule for Organiz					45-3	503672 Page 3
Part	(Complete only if you checked the					t to qualify	vindor Bort II
							yunder Part II.
C4	If the organization fails to qualify	under the te	sts listed bei	ow, piease co	mpiete Part I	i.) /	
	on A. Public Support		I				
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received (Do not include any "unusual grants")					<u>/</u>	
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	<u> </u>			/		<del> </del>
3	furnished by a governmental unit to the			/	,		
	organization without charge						
•	-			/			
6	Total. Add lines 1 through 5	· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>			<del>-</del>
7a <sub>,</sub>	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
þ	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from				All Inc.	See No.	
	line 6 )						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,		/				
	payments received on securities loans, rents,	/	Y				
	royalties, and income from similar sources	/					
b	Unrelated business taxable income (less						
-	section 511 taxes) from businesses	/					
	acquired after June 30, 1975	/					
С	Add lines 10a and 10b.	<del>-/</del>					
11	Net income from unrelated business	/					_
• • •	activities not included in line 10b, whether	<b>/</b>					~
40	or not the business is regularly carried on	<del> </del>	<del> </del>	<del> </del>			<del>                                     </del>
12	Other income Do not include gain of						
	loss from the sale of capital assets		1				
40	(Explain in Part VI)		<b> </b>				
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	<u>L</u>	<u> </u>	<u> </u>			
14	First five years. If the Form 990 is for th		's first, second	, third, fourth,	or fifth tax yeai	r as a secti	on 501(c)(3)
	organization, check this box and stop he			<u> </u>	<u> </u>		<u></u>
Secti	on C. Computatión of Public Suppo						
15	Public support percentage for 2017 (line				f))	15	%
16	Public support percentage from 2016	Schedule A,	Part III, line	<u></u>	<u> </u>	16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2017			by line 13, co	umn (f))	17	%
18	Investment income percentage from 20					18	%
19a	33//3 % support test-2017. If the organ				and line 15 is r		
	Jine 17 is not more than 331/3%, check this						
h/	33 1/3 % support test–2016. If the organi						
1	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d		-				
	Tivate realization. It the organization of	on ook a	-57 5H HIG 17	,, 100,	5.755K 1115 DOX	J	doo.io

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E, If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	aπ v	.)	
Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation If historic and continuing relationship, explain.	1_		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported			10000
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	A PARTY		
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	17 E		200
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)		翻論	ù dian
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		ļ
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	Sec. 3		
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion		7	
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination	13435	2	i de la companya de l
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	5 7 3 7		190
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)		2. 1 m	1 1 2 2
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	T. P. May	<b>307</b> 4	. 402.0
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN	18 20		100
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	被动腿		
	designated in the organization's organizing document?	5b	mars LL	1.2 2.0 2.2
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	接線	PER COL	
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also		2001	P. 16-164
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	10111111111		
	Part VI.	6	ARCON Y	7
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	30000	111111111111111111111111111111111111111
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	777		SALES
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	******	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	19/19/	1000	1440
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	1274		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	Carro	1000	200
-	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	onweller St.	11.75
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			<b>793</b>
•	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c	SELECTION OF STREET	1
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			ema
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a	88.4857 <u>646</u>	A.425 (1980)
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	經統	MALE.	SAC
~	Did the diguination have any excess business herange in the tax year. [000 conedute o, I offir 4120, to	SHOW AND WAY	3000 1000	198 6 20 3

10b

determine whether the organization had excess business holdings.)

rait	Supporting Organizations (Continued)			
		VEGENERAL SE	Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	2000	
ь	A family member of a person described in (a) above?	11b	T	—
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	1	
Secti	on B. Type I Supporting Organizations			
`			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	3452	Same of the	
Coati	on C. Type II Supporting Organizations	2		—
Secu	on C. Type it Supporting Organizations	<del></del>	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	Supplied a	<b>3</b> 20	4.00
·	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
1		To Section 1	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			77.50
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	ign cot.	250000
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	or and a	200 d. P. T.	1,000
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how		8.7	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's		633 633	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
	on E. Type III Functionally Integrated Supporting Organizations			<del></del>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstruc	tions	)
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI. how you supported a government entity.	/000 /5		ntiono)
С	The organization supported a governmental entity Describe in Part VI How you supported a government entity	(500 11	istruc	,uons)
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		Jør:	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities			orest in
L	•	2a	NAME OF	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the		<b>3</b>	
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	1134111	
3	Parent of Supported Organizations Answer (a) and (b) below.	2014 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(1500 jo. / 1500 jo. /	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	THE PROPERTY OF		
	of its supported organizations?If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017 Young Americans for Liberty E	,	endation 45-	3503672 Page (
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or			33036/2 1490
Check here if the organization satisfied the Integral Part Test as a qualifying     See instructions. All other Type III non-functionally integrated supporting of	trus	st on Nov 20, 1970 (explain	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3	<u> </u>	
4 Add lines 1 through 3	4		
5 Depreciation and depletion .	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)  7 Other expenses (see instructions)	6		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount	10	(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
C Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		·
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

emergency temporary reduction (see instructions)	
7 Check here if the current year is the organization's first as a	non-functionally integrated Type III supporting organization (see
instructions)	

Section C - Distributable Amount

4 Enter greater of line 2 or line 35 Income tax imposed in prior year

2 Enter 85% of line 1.

1 Adjusted net income for prior year (from Section A, line 8, Column A)

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

**Current Year** 

Schedul	e A (Form 990 or 990-EZ) 2017 Young Americans fo	r Liberty Fou		5-3503672 Page 7
Part		3) Supporting Orgai	nizations (continued	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
	Administrative expenses paid to accomplish exempt purp	noses of supported orga	nizations	<u> </u>
4	Amounts paid to acquire exempt-use assets	occo or supported orga	THE STATE OF THE S	
5	Qualified set-aside amounts (prior IRS approval required	<del>\</del>		
<del>-6</del>	Other distributions (describe in Part VI) See instructions			<u> </u>
$\frac{3}{7}$	Total annual distributions. Add lines 1 through 6			
		h the ergenization is re-	noncivo.	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ) See instructions	n the organization is res	sponsive	
9	Distributable amount for 2017 from Section C, line 6	<u>-</u>		'
10	Line 8 amount divided by Line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in <b>Part VI</b> ) See instr			
3	Excess distributions carryover, If any, to 2017	វិទីបើសិស្សិតស្នាក់ពីប្រកួតកាត់ការប្រជាពីកើតនីវិធីរបស់ដែលនិងជំងឺប្រកិត្តិទីឯ លុះការប្រជាពីបញ្ជាប់ក្រុមការប្រកួតការប្រកួតកាន់ប្រកួតកាន់ប្រកួតកាន់ប្រកួតកាន់ប្រកួតកាន់ប្រកួតកាន់ប្រកួតកាន់ប្រ	BEAST STEEL CARETURE OF THE GOOD OF THE CONTROL OF	
a		angagestiis Tidagestiitäasaaitiinia	abahangganan di Marahan	
<u>b</u>	From 2013	am organic section description of the con-		
	From 2014	Market section to a section of		
d	From 2015	A V.C. Charage on months and the contribution	իրինինդութը լայլը։ Է՝ ՀՀ 1433, Հ Դապետանանական ան Հայաստանությունի անհանունին արանական համար	աթացանում հայան անման աննականների և Հայաստանում։ արտականում հայան անման անձագույն և Հայաստանում
e	From 2016			
f	Total of lines 3a through e	,	C. COMPANY PROPERTY AND CO.	
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i.	Carryover from 2012 not applied (see instructions)	i in in contra and an	CONSEQUIDA AND COSE ON 1448E SYSTEMESE SERVICES OF CONSEQUENCES OF COSE OF COS	
i_	Remainder Subtract lines 3g, 3h, and 3i from 3f		The state of the s	ASSE CONTRACTOR TO THE PROPERTY OF THE PROPERT
4	Distributions for 2017 from Section			
	D, line 7 \$			
a	Applied to underdistributions of prior years	Mara Ambiert 1988		Agreement of the control of the cont
b	Applied to 2017 distributable amount			MAYA TRA TR BANGOTERRENGAN AND AND CONTRACTOR
c	Remainder Subtract lines 4a and 4b from 4.	Today Carlo and southern to an and today to the		STATE AND DESCRIPTION OF A LOCATION
. 5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions			
7	Excess distributions carryover to 2018. Add lines 3j and 4c	The state of the s	immalibrii (et c. a.c., 12.66-576); ist Sen kurre (migratik in se gara a c. sen kurre (migratik in se gara a c.	
-8	Breakdown of line 7	PARTIES AND	Parket and the state of the sta	эт станиция на принция на принци
a	Excess from 2013			did Al-Al-addition (1) 0.422.56.
<u>a</u>	Excess from 2014			
	Excess from 2015			
d	Excess from 2016	1 1 to Mandard 1997 To March 1		
e	Excess from 2017			Charles 1440 At Chill Advance Common Property of the Common Commo

	orm 990 or 990-EZ) 2017 Young Americans for Liberty Foundation 45-35036/2 Page 8
Part VI	
	Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B,
	lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b,
	3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E,
	lines 2, 5, and 6 Also complete this part for any additional information (See instructions.)
	····
	· · · · · · · · · · · · · · · · · · ·

# **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.

Department of the Treasury Internal Revenue Service

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

Varia	ng Americans for Liberty Fou	ndation		3503673
Part				3503672
rait			nus oi	Accounts.
	Complete if the organization answered	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
		(a) Donor advised funds	<del></del>	(b) Funds and other accounts
1	Total number at end of year		+-	
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)		<del></del>	
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors	•		·
	property, subject to the organization's exclusive legal conti			
6	Did the organization inform all grantees, donors, and dono			,
	purposes and not for the benefit of the donor or donor adv			
	private benefit?			· · · · · . Yes No
Part		W/ # 5 000 5 (B/ E 7		
	Complete if the organization answered			
1	Purpose(s) of conservation easements held by the organiz	` ` `		
	Preservation of land for public use (e.g., recreation or	<b>=</b>	-	y important land area
	Protection of natural habitat	Preservation of a	certified	historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qu	alified conservation contribution in the form of	a conse	
	of the tax year			Held at the End of the Tax Yea
а	Total number of conservation easements		•	2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic	' '		2c
d	Number of conservation easements included in (c) acquire		е	
	listed in the National Register			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			
5	Does the organization have a written policy regarding the		lations,	
	and enforcement of the conservation easements it holds?		•	
6	Staff and volunteer hours devoted to monitoring, inspecting	ig, handling of violations, and enforcing conser	vation ea	asements during the year
7	Amount of expenses incurred in monitoring, inspecting, ha	andling of violations, and enforcing conservation	n easen	nents during the year
	<b>S</b>			
8	Does each conservation easement reported on line 2(d) al		)(4)(B)(i	
	and section 170(h)(4)(B)(ii)?		•	∐Yes ∐No
9	In Part XIII, describe how the organization reports conserv	•		·
	include, if applicable, the text of the footnote to the organiz	zation's financial statements that describes the	organiz	ation's accounting for
Dod	conservation easements	no of Art Historical Transverse	Otho	- Cimilar Accets
Part	Organizations Maintaining Collection Complete if the organization answered		Othe	i Silillar Assets.
4-				
1a	If the organization elected, as permitted under SFAS 116			
	historical treasures, or other similar assets held for public		ce or pur	one service, provide, in Part XIII,
	the text of the footnote to its financial statements that described the second of the			and the state of the
b	If the organization elected, as permitted under SFAS 116	• •		·
	historical treasures, or other similar assets held for public	exhibition, education, or research in furtherand	ce or put	blic service, provide the following
	amounts relating to these items			
	(i) Revenue included on 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		gain, pro	owide the following amounts
	required to be reported under SFAS 116 (ASC 958) relating	<u> </u>		
a	Revenue included on Form 990, Part VIII, line 1	• • • • •		P \$

Schedu	ile D (Form 990) 2017 Young Amer	icar	ns for	Liber	ty Fo	undati	on.	45-3	503672	Page 2
	II Organizations Maintaining									tınued)
3	Using the organization's acquisition, access	ion, and	other record	ds, check ar	y of the fol	llowing that a	re a sign	ificant use of its co	llection items	
	(check all that apply)									
а	Public exhibition			d	Loan o	or exchange	program	S		
b	Scholarly research			е	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollection	s and explai	n how they f	urther the	organization's	s exempt	purpose in Part X	H	
5	During the year, did the organization solicit of								_	<b></b>
Part	rather than to be maintained as part of the or IV Escrow and Custodial Arra			on'			•	• • •	Yes	<u>No</u>
T all	Complete if the organization			" on Forn	n 990, P	art IV, line	9, or	reported an an	nount on F	orm
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custod	ian or of	her intermed	diary for con	tributions o	or other asset	ts not inc	luded	_	_
	on Form 990, Part X?						•		. Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII	and co	mplete the fo	ollowing tabl	е					
								Am	ount	
С	Beginning balance					-	10	;		
d	Additions during the year						10	<b>i</b>		
в	Distributions during the year						16	·		
f	Ending balance	٠	•			•	<u>1f</u>	<u> </u>		
2a	Did the organization include an amount on F	orm 990	), Part X, line	e 21, for esc	row or cus	itodial accour	nt liability	<i>?.</i>	. [_] Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII	Check	here if the e	explanation I	nas been p	rovided on Pa	art XIII.		<u> </u>	Щ
Part										
	Complete if the organization	answe	ered "Yes	on Forn	n 990, P	art IV, line	10.		,	
		(a) C	Current year	(b) P	nor year	(c) Two yea	ars back	(d) Three years ba	ck (e) Four y	ears back
1a	Beginning of year balance			<u> </u>						
b	Contributions									
C	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent yea	r end balanc	æ (line 1g, c	olumn (a))	held as				
а	Board designated or quasi-endowment	▶_		_%						
b	Permanent endowment ▶%	,								
С	Temporanly restricted endowment ▶		_%							
	The percentages on lines 2a, 2b, and 2c sho	ould equ	ial 100%							
За	Are there endowment funds not in the posses	ssion o	f the organız	ation that ar	e held and	administered	for the			
	organization by								Υ	es No
	(i) unrelated organizations								. 3a(i)	
	(ii) related organizations								. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiz	ations li	sted as requ	iired on Sch	edule R?				. 3b	
4	Describe in Part XIII the intended uses of the	e organi	zaton's endo	owment fund	is					
Pari	VI Land, Buildings, and Equip	oment	<b>:</b> .							
	Complete if the organization	answe	ered "Yes	" on Forn	n 990, Pa	art IV, line	11a. S	See Form 990,	Part X, In	ie 10.
-	Description of property		(a) Cost or ot (investr		1' '	r other basis ther)		Accumulated epreciation	(d) Book va	alue
1a	Land				†		111,000	1.75 31 Talan 10 If		
b	Buildings	· · ·			†					
C	Leasehold improvements	<b> </b>			<del> </del>		<del> </del>	-		
d	Equipment	<b> </b>			<del>                                     </del>		<del>                                     </del>	+		
u e	Other	·					<del>                                     </del>	+		
	Add lines 1a through 1e (Column (d) must ed	gual For	m 990. Part	X. column	B), line 1∩	c)	L			
UYA	The most of the second for the second for the second secon	, , 0/	555, 1 011	,		- /	· · · · ·		edule D (Form	990) 2017
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ociedule D	FOIII 990) 2017	Young	<u>Americans</u>	IOT	<u> 1-1</u>
Part VII	Investment	s — Othe	r Securities.		
	Complete if	the organ	ization answered	d "Yes"	' on
	(a) Des	cription of sec	unty or category		

Complete if the organization answered "Yes" on Form	990, Part IV, line	11b. See Form	990, Part X, line 12:
(a) Description of security or category (including name of security)	(b) Book value	` (c) Me	thod of valuation ' id-of-year market value
1) Financial derivatives		•	
2) Closely-held equity interests	•	1	, ,
3) Other	, j	· · · · · · · · · · · · · · · · · · ·	
` (A)			
(B)			
(C)			,
(D) · · · · · · · · · · · · · · · · · · ·		4	ţ.
(E)		2.	<del></del>
(F) ,		, ,	
'(G) · · ·	. ,		
			<del></del>
(H)  Total: (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	•		
Part VIII Investments — Program Related.			
Complete if the organization answered "Yes" on Form	990, Part IV, line	11c. See Form	990, Part X, line 13
) (a) Description of investment	(b) Book value		thod of valuation id-of-year market value
1)			
2)	· -,·		•
3)			
4)			
5)			
6) '		. 2)	, ,
7)	• _		•
8)	•		
9)	-		
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 13 ) ▶	u u	Hara-Arthetischerischen	A. C. C. C. Carlo and the control of
Part IX Other Assets.		<u> स्थितिक विकास /u>	Paraustanting Commentation of the Property of the Comment of the C
Complete if the organization answered "Yes" on Form	990, Part IV, line	11d. See Form	990, Part X, line 15.
(a) Description	i *	1 , .	(b) Book value
1)		•	
2)		•	
3) '. '. '.			
4)		-	•
5)	,		
6) •	,		
7) ·	+		F
8) * *			, ,
9)	•		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		·	
Part X Other Liabilities	· · ·		

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	•	(b) Book value	
- (1)	Federal income taxes		٠, ٠	
(2)	. *		* *	
(3)	•			
(4)	,	,		ada din kana di sa kana da kana di kana kana kana kana kana kana kana kan
(5)	*		, , ,	Contract of Economic Contract Unique Special Security Sec
(6)			•	
(7)	•		• • • • • • • • • • • • • • • • • • • •	THE CONTROL OF THE PROPERTY OF
. (8)	i i		•	
(9)	)			
Tota	II. (Column (b) must equal Form 990, Part X, col	(B) lin	ne 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

	ule D (Form 990) 2017 Young Americans for Liberty F				3503672 Page 4
Pan	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, F			Retu	rn. 
1	Total revenue, gains, and other support per audited financial statements			1	2,947,261.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			3	
а	Net unrealized gains (losses) on investments	2a	29,864.		
b	Donated services and use of facilities	2b	163,879.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d			2e	193,743.
3	Subtract line 2e from line 1			3	2,753,518.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,732.		
b	Other (Describe in Part XIII )	4b			•
С	Add lines 4a and 4b			4c	3,732.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) .			5	2,757,250.
Part				er Re	
	Complete if the organization answered "Yes" on Form 990, F				
1	Total expenses and losses per audited financial statements .			1	2,996,886.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	. 2a	163,879.		
b	Prior year adjustments	. 2b	•		
С	Other losses	. 2c			
d	Other (Describe in Part XIII )	. 2d			
е	Add lines 2a through 2d	. —		2e	163,879.
3	Subtract line 2e from line 1			3	2,833,007.
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	3,732.		
b	Other (Describe in Part XIII )	. 4b	1.		
c	Add lines 4a and 4b			4c	3,733.
5	Total expenses Add lines 3 and 4c.(This must equal Form 990, Part I, line 18)	•		5	2,836,740.
	XIII Supplemental Information.	<u> </u>	·· · · · ·		2/050/740.
Provide	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any a			art X, lir	ne 2;
	, Ln 4b cellaneous reconciling difference				
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Schedule D (Form 990) 2017

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Schedule D (I	Form 990) 2017	Young	Americans	for	Liberty	Foundation	ı	45-3503672	Page 5
Part XIII	Supplemen	ntal Inform	Americans nation (continue	d)					-
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Schedule D (Form 990) 2017

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# **SCHEDULE M** (Form 990)

# **Noncash Contributions**

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

2017

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Young Americans for Liberty Foundation

Employer identification number

45-3503672

Part	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	Х	1	74,706.	FMV
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 <b>\(\big </b> ()			· ·	
26	Other ►()				
27	Other ►()				
28	Other (				
29	Number of Forms 8283 received by the	organization	during the tax year for contribution	ons for which the	
	organization completed Form 8283, Part	IV, Donee A	Acknowledgement		29 0
					Yes No
30 a	During the year, did the organization rec	eive by contr	ibution any property reported in I	Part I, lines 1 through 28,	
	that it must hold for at least three years it	from the date	of the initial contribution, and w	hich isn't required to be used fo	r exempt
	purposes for the entire holding period?				30a
b	If "Yes," describe the arrangement in Pa	nrt II			
31	Does the organization have a gift accept	ance policy t	hat requires the review of any no	onstandard	
	contributions?	•			
32 a	Does the organization hire or use third p	arties or rela	ted organizations to solicit, proce	ess, or sell noncàsh	
	contributions?				32a
b	If "Yes," describe in Part II				
33	If the organization didn't report an amount	nt ın column	(c) for a type of property for which	ch column (a) is checked,	
	describe in Part II				

Part II	Supplemental Information. 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.
P1, C This	ol B is the number of contributions.
-	
	-
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
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### **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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

►Attach to Form 990 or 990-EZ. ► Go to www irs gov/Form990 for the latest information

Open to Public Inspection

Employer identification number

Young Americans for Liberty Foundation	45-3503672
Part VI Line 2	
Jeff Frazee and Kevin Martin have a family Part VI Line 8b There are no such committees.	y relationship.
Part VI Line 11b	
Prior to filing, a copy of Form 990 is di	stributed to all Directors and
is reviewed by the President for accuracy	and completeness.
Part VI Line 19 Governing documents, financial statements	
policies are made available upon request	at no charge.
Part VI Line 17 AL,AK, AR, CA, CT, CO, FL, GA, HI, IL, KS	, KY, ME, MD, MA, MI, MN,
MS, NH, NJ, NY, NM, NC, OH, OK, OR, PA, RI,	SC, TN, UT, VA, WV, WI
Part XI Line 9 In 2017, YALF initiated and concluded it	
adjustment was necessary to reconcile th	
the year adjustments required for the au	dit
···	
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	,

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Part I

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

2017

OMB No 1545-0047

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

Young Americans for Liberty Foundation

Open to Public Inspection Employer Identification number 45-3503672 (f)
Direct controlling
entity Section 512(b)(13) controlled entity? ž Identification of Related Tax-Exempt Organizations. Complete of the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. × Yes (f) Direct controlling entity End-of-year assets e N/A (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section Legal domicile (state or foreign country) 501c4 (c) Legal domicile (state or foreign country) Primary activity 8 Ð P.O. Box 17560 Arlington, VA 22216 26-2417908 Youth civics (b) Primary activity (1) Young Americans for Liberty, Inc. (a)
Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization Part II **£** 3  $\Xi$ 3 ල 9 € (5) (2)ව (9)

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

Schedule R (Form 990) 2017

(2)

45-3503672 Page 2

Schedule R (Form 990) 2017 Young Americans for Liberty Foundation

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

General or Percentage managing ownership partner?		000		0000.0		0000.0	0.000.0		0000.0		0000.0		0000.0
(I) General or managing partner?	N <sub>o</sub>	,											
Gene man part	Yes												
(I) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)													
ortonate trons?	No												
Disprope alloca	Yes												
(g) (h) Share of end-of- Disproportionate year assets allocations?													
(f) Share of total income													
Predominant income (related, unrelated, excluded from tax under	sections 512-514)						•						
(d) Direct controlling entity							•						
(c) Legal domicile (state or	country)												
(a) (b) (c) (d) Predominant Share of total ddress, and EIN of Primary activity Legal Direct controlling Predominant Share of total and EIN of Primary activity Legal Direct controlling Predominant Share of total come (related, income (state or schuded from foreign favingles)													
(a) Name, address, and EIN of related organization		(1)	(2)		(3)	(	(4)	(5)		(9)		(7)	

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

ı		_			ı	ı		l	ı		ı		ſ		ļ
	Ξ	Section 512b (13) controlled entity?	No												
		Section: or	Yes												
	Ξ	Percentage ownership		0000 0		0000	0.000.0		0.000		0000.0		0.000.0		0000.0
	(B)	of r assets													
17 VCGII.	€	Share of total income													
מפר ממווווא נוופ נפ	(e)	Type of entity (Coop, Scop, or trust)													
	(P)	Direct controlling entity													
א וו בשובח שא ש כ	9	Legal domicile (state or foreign country)													
בומוכת סואמו וודמוסו	Ð	Primary activity													
וווים כדי, טפטמטפרור וומע טווים של איני איני איני איני איני איני איני אינ	(a)	Name, address, and EIN of related organization		(1)	(2)	(3)		(4)		(5)		(6)		(7)	

Schedule R (Form 990) 2017

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	r more related organi;	zations listed in Parts		
	•			1a ×
<b>b</b> Giff, grant, or capital contribution to related organization(s)		•	<u>-</u> 1	1b
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)	:	:	1	1d X
e Loans or loan quarantees by related organization(s)		:		1e X
f Dividends from related organization(s)				+ ×
<ul> <li>a Sale of assets to related organization(s)</li> </ul>	,			1g X
	•		L	L
i Lease of facilities equinment or other assets to related organization(s)			Γ	$\downarrow$
k Lease of facilities, equipment, or other assets from related organization(s)	,			<del> </del>
Performance of services or membership or fundraising soli			:	+ ×
m Performance of services or membership or fundraising solicitations by related organization(s)		•	<del> -</del>	1m
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n X
o Sharing of paid employees with related organization(s)			· :	10 X
				調整系統
p Reimbursement paid to related organization(s) for expenses			<u>-  </u> : :	×
q Reimbursement paid by related organization(s) for expenses		•	- : : : :	1q X
			30,	
Other transfer of cash or property to related organization(s)	: :		: :	×
- 1				1s   x
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	nplete this line, includ	ling covered relations	hips and transaction t	hresholds
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nount involved
			Proportional rate	te as tracked
(1) Young Americans for Liberty, Inc.	Z	Under \$50k	hourly by employees	
			Proportional rate as hourly by employees.	te as tracked Vees.
(2) Young Americans for Liberty, Inc.		Under \$50k		
(3)				
(4)	•			
(5)				
(9)				
UVA			Schedule R	Schedule R (Form 990) 2017

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

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

								[		
(a)	(a)	(c)	(a)	(e)	(1)	(B)	(n)	(I)	(D)	(K) Demonstrate
אמוופ, מסטפטט, מוט בווע טי פוועי	בייייין אַ מְּכְּיוּאָנוֹלְ	(state or foreign country)		section Section 501(c)(3) organizations?	total income	<b>=</b>	allocations?	o g	managing partner?	ownership
	41		sections 512-514)	Yes No			Yes No		Yes No	
(1)										
(2)										0.000
										0000.0
(3)										0.000.0
(4)										0000
(5)						8				0000.0
(9)										0000.0
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(13)										0000.0
(14)			·							0.000.0
(15)										0.000
(16)										0.000
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Schedule R (	Form 990) 2017		Americ	ans i	tor L	lberty	<u>Foun</u>	<u>dation</u>		<u>45-3</u>	<u>503672</u>	Page 3
Part VII	Supplem	ental Info	<b>rmation</b> . nformation	for roor	ooneoe t	o guartia	ns on Sc	shadula D	Soounetr	uctions		
	Provide a	<u>uditional ii</u>	liormation	ior resp	Junses ti	o quesilo	ns on Sc	nedule R	. See mstr	uctions.		
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