** PUBLIC DISCLOSURE COPY **

Form **990**

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

and ending

2011

Open to Public Inspection

В	Check it	C Name of organization		D Employer identif	ication number					
	∏Addr									
뉴	chan Name									
<u> </u>	chan Initia	Doing Business As		38-291						
F	returi	n- '	oom/suite	E Telephone number	er					
<u></u>	Term ated Amer	32 SOUTH STREET 50	00	410-9	51-1500					
느	lretun	City or town, state or country, and ZIP + 4		G Gross receipts \$	31,686,548.					
	_Appli _tion pend	BALTIMORE MD 21202		H(a) Is this a group i	return					
	point	F Name and address of principal officer:WILLIAM S. REESE		for affiliates?	LYes Lx_No					
		SAME AS C ABOVE		H(b) Are all affiliates in	cluded? Yes No					
1	Tax-ex	empt status: x 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or	527	If "No," attach a	a list. (see instructions)					
<u>J \</u>	Webs	te: > www.iyfnet.org		H(c) Group exemption	on number 🕨					
		organization: x Corporation Trust Association Other ►	L Year o	of formation: 1990	M State of legal domicile; IL					
Pa	art I	Summary								
ø	1	Briefly describe the organization's mission or most significant activities: A GLOBAL	NGO PR	EPARING YOUNG						
Governance	1	PEOPLE TO BE HEALTHY PRODUCTIVE AND ENGAGED CITIZENS.								
ı,	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net a	ssets.					
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	17					
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			16					
SS	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			94					
Activities &	6	Total number of volunteers (estimate if necessary)		6	0					
Ė	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	******	7a						
⋖	b	Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T. line 8		7b						
	<u> </u>	Net unrelated business taxable income from Form 990-T, line 3 C. C. Contributions and grants (Part VIII, line 3) BLC		Prior Year	Current Year					
4.	8	Contributions and grants (Part VIII, line 4)) [2]		29,212,529,	26,942,234.					
Revenue	9	Program service revenue (Part VIII, line eg)								
		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	├─	188,414.	398,501.					
ď	11	Other revenue (Part VIII) column (A) lines 5, 6d, 8c, 9c, 10c, and 1100	411,091.	545,504.						
	12	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11 per Column Total revenue - add lines 8 through 11 (must equal Part VIII tolking (A), Aire 125 Grants and similar amounts paid (Part IX, column (A), lines 1304 Benefits paid to or for members (Part IX, column (A), line 4)		305,200	572,207.					
	12	Total revenue - add lines 8 through 11 (must equal Part VII) the State (4, part 22		30,117,234.	28,458,446.					
	13	Panafita and similar amounts paid (Fart IX, column (A), lines (A)		9,652,528.	8,243,907.					
	14	Coloring when compared to a symbol control (A), like 4)		0.	0.					
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,832,838,	9,469,637.					
Expenses	IVa	Tolessional fundation grees (Fartis, Column (A), line 11e)		O.	0.					
Ä		Total fundraising expenses (Part IX, column (D), line 25) 820 ,87		<u> </u>						
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,007,881.	7,237,015.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		22,493,247,	24,950,559,					
- 60	19	Revenue less expenses. Subtract line 18 from line 12		7,623,987.	3,507,887.					
Net Assets or Fund Balances			Beg	inning of Current Year	End of Year					
Sset	20	Total assets (Part X, line 16)		36,972,589.	39,138,828.					
잻	21	Total liabilities (Part X, line 26)		2,720,662,	1,989,327.					
캳	22	Net assets or fund balances. Subtract line 21 from line 20		34,251,927.	<u>37,149,501.</u>					
	ırt II	Signature Block								
		Ities of perjury, I declare that I have examined this return, including accompanying schedules a			ny knowledge and belief, it is					
true,	corre	t, and complete. Declaration of preparer other than officer) is based on all information of which	h preparer l	nas any knowledge.						
		COPY - RETAIN FOR								
Sign	า	Signature YOUTE RECORDS		Date						
Her	e	WILLIAM S. REESE, PRESIDENT/CEO								
		Type or print name and title								
		Print/Type preparer's name Preparer's signature	Da	ate/ Check	PTIN					
Paid		WILLIAM E. TURCO, CPA	$\setminus A$	2/26/17 if self-employ	red £00369217					
Prep	arer	Firm's name MCGLADREY LLP		Firm's EtN	42-0714325					
Use		Firm's address 9737 WASHINGTONIAN BLVD., #400								
	-	GAITHERSBURG, MD 20878-7340		Phone no. (301) 296-3600					
Mav	the II	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No					

	1990 (2011) INTERNATIONAL YOUTH FOUNDATION	38-293539	7 Pag	_{le} 2
Pa	rt III Statement of Program Service Accomplishments		_	
	Check if Schedule O contains a response to any question in this Part III		<u></u> [x
1	Briefly describe the organization's mission:			
	IYF IS A GLOBAL NGO THAT PREPARES YOUNG PEOPLE TO BE HEALTHY			
	PRODUCTIVE AND ENGAGED CITIZENS			
2	Did the organization undertake any significant program services during the year which were not listed on			
	the prior Form 990 or 990-EZ?	•••••	Yes x	No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes x	No
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by	expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	grants and allo	ocations to	
	others, the total expenses, and revenue, if any, for each program service reported.	_		
4a	(Code:) (Expenses \$11,318,365. including grants of \$4,713,041.) (Reven	ue \$		
	YOUTH: WORK			— '
	LAUNCHED IN 2008, YOUTH: WORK BRINGS EMPLOYMENT AND ENTREPRENEURSHIP			
	PROGRAMS TO YOUNG PEOPLE, FUNDED BY THE U.S. AGENCY FOR INTERNATIONAL			
	DEVELOPMENT (USAID), YOUNG PEOPLE GAIN ACCESS TO VOCATIONAL, TECHNICAL,			
	AND LIFE SKILLS TRAINING; JOB-PLACEMENT SERVICES; ENTREPRENEURSHIP			
	TRAINING; AND SUPPORT FOR JOB CREATION THROUGH START-UP AND SMALL AND			
	MEDIUM YOUTH-LED ENTERPRISES. AMONG THE 16 YOUTH: WORK PROJECTS, ARE			
	THE CARIBBEAN YOUTH EMPOWERMENT PROGRAM, A THREE-YEAR, IT JOB-TRAINING			
	AND PLACEMENT INITIATIVE TARGETING THOUSANDS OF UNEMPLOYED YOUTH ; AS			
	WELL AS YOUTH: WORK JORDAN, A FIVE-YEAR PROGRAM DESIGNED TO IMPROVE			
	YOUTH EMPLOYMENT AND CIVIC ENGAGEMENT.			
	TOOTH EMPHOTMENT AND CIVIC ENGAGEMENT.			
4b	(Code:) (Expenses \$ 2,367,515, including grants of \$ 1,183,839,) (Revenue			<u> </u>
	ENTRA 21:			- ′
	ENTRA21 PROVIDES DISADVANTAGED YOUTH WITH EMPLOYMENT TRAINING AND JOB			
	PLACEMENT SERVICES SO THEY CAN INCREASE THEIR EMPLOYABILITY AND FIND			
	JOBS. THE PROGRAM WAS LAUNCHED IN 2001 WITH SUPPORT FROM THE			
	MULTILATERAL INVESTMENT FUND OF THE INTER-AMERICAN DEVELOPMENT BANK.			
	THE PROGRAM FEATURES COMPREHENSIVE TRAINING IN LIFE AND TECHNICAL			
	SKILLS AS DICTATED BY THE NEEDS OF THE LABOR MARKET, INTERNSHIPS, JOB PLACEMENT SERVICES, AND THE ACTIVE INVOLVEMENT OF EMPLOYERS IN PROGRAM	·		
	DESIGN AND EXECUTION. DURING PHASE I (2001-2007), MORE THAN 19,600			
	YOUTH BENEFITED. JOB PLACEMENT RATES AVERAGED 54%, WITH THE NUMBER OF	···		
	YOUTH WHO RE-ENROLLED IN FORMAL EDUCATION NEARLY DOUBLING, BY 2011,		· • • • • • • • • • • • • • • • • • • •	
4-	PHASE II HAD REACHED AN ADDITIONAL 116,000 DISADVANTAGED YOUTH.			
4¢		ıe \$	968,020	<u></u>)
	OTHER EMPLOYABILITY PROGRAMS:			
	IYF'S WORK PROGRAMS IMPROVE YOUNG PEOPLE'S EMPLOYABILITY PROSPECTS BY		-	
	PREPARING THEM FOR QUALITY JOBS OR HELPING THEM TO SUCCEED AS			
	ENTREPRENEURS. IYF EQUIPS YOUTH WITH LIFE SKILLS AND TECHNICAL			
	KNOW-HOW, WHILE CONNECTING THEM TO THE MENTORS, INTERNSHIPS, AND JOB		11.	
	PLACEMENT SERVICES THEY NEED TO SUCCEED IN THE JOB MARKET, WE ALSO			
	HELP YOUTH EMPLOY THEMSELVES AND CREATE NEW JOBS BY TRAINING THEM TO BE			
	ENTREPRENEURS AND LINKING THEM TO THE CAPITAL NEEDED TO START NEW			
	BUSINESSES,			
	· · · · · · · · · · · · · · · · · · ·			
4d	Other program services (Describe in Schedule O.)			
	(Expenses \$ 4,951,114. including grants of \$ 1,765,078.) (Revenue \$)	
<u>4e</u>	Total program service expenses 20,699,058,			
			Form 990 (20	11)

Form 990 (2011) INTERNATIONAL YOUTH FOUNDATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	_x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_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		х
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	<u></u>	<u> </u>
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		Х
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,	1		
_	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		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	_		
10	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40		
11	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10	X	
"	as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	x	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Ha	Α	
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	. ,		<u> </u>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	- 1.0		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		[
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	_ 16	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	,	}	
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		х
19		40		
202	complete Schedule G, Part III	19		<u>x</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b	+	X
<u>. u</u>	n 100 to mio 200, did uno organización attació a copy of its addited infaricial statements to tris fettini?	<u></u>		

Form 990 (2011) INTERNATIONAL YOUTH FOUNDATION
Part IV Checklist of Required Schedules (continued)

.0 00	epot series		·	
04	Did the organization report more than \$5,000 of grants and other assistance to any apparament or organization in the		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
00		21	_X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			1
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		1	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ŀ		1
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			1
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			_X
		29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ı
	contributions? If "Yes," complete Schedule M	_30_		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35a		35a	x	
þ	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	_x_	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	[х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	_x_	

Form 990 (2011)

Form 990 (2011) INTERNATIONAL YOUTH FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

• •	Check if Schedule O contains a response to any question in this Part V					x
			***************************************	********	Yes	T
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	48			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c		eporta	ıble gaming		1.	
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	94			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ms?		2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За	x	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	x	
b	If "Yes," enter the name of the foreign country: ► SEE SCHEDULE O					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	\ccou	nts.			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		•••••	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?)	5b		x
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e org	anization solicit			
	any contributions that were not tax deductible?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions c	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			LHI.		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices ;	provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		xt?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f	igsquare	x
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g	<u> </u>	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		L
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Die			L.L.		Pirind
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ie during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.			<u> </u>		
а	Did the organization make any taxable distributions under section 4966?	•••••	A\A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	•••••	N/A	9b		
10	Section 501(c)(7) organizations, Enter:		1			
a		10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		District.		
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	<u>11a</u>				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
		11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	· · · · · · · · · · · · · · · · · · ·	12b				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			.: ::::		
а	Is the organization licensed to issue qualified health plans in more than one state?		A/A	13a		
1-	Note. See the instructions for additional information the organization must report on Schedule O.				Pair II. Rabba H	
D	Enter the amount of reserves the organization is required to maintain by the states in which the	40.				
_		13b		Minas I		
	Enter the amount of reserves on hand	13c	1	14-	:::	<u>riterijo d</u>
				14a		Х
מ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	: U		14b		

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

Form 990 (2011) INTERNATIONAL YOUTH FOUNDATION 38-2935397 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a	17		
	If there are material differences in voting rights among members of the governing body, or if the governing	11111		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	16		
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		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	. 3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	. 5		Х
6	Did the organization have members or stockholders?	. 6		х
7a			-	1
	more members of the governing body?	. 7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	. 7b	<u>.</u>	x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	111111111111111111111111111111111111111		Heli
а	The governing body?	. 8a	х	
b		. 8b	х	
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	1	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	_х_	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?		х	
14	Did the organization have a written document retention and destruction policy?		х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	1
b	Other officers or key employees of the organization	15b	х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O			
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) availai	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, a	ınd fina	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation:	>	
	SAMANTHA BARBEE - 410-951-1500	_, •		
	32 SOUTH STREET NO. 500 BALTIMORE MD 21202			
132006		Forn	990 (2011)

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

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

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

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

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

- · 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.

	hours per	will have an ellipsed and				than is bot	in an	Reportable compensation	Reportable compensation	(F) Estimated amount of other	
	week (describe hours for related organizations in Schedule O)	Trustee or director		Officer		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) DOUGLAS L. BECKER											
CHAIRMAN	0.40	X	_	X				0.	0.	0.	
(2) BERNISE ANG							١.				
DIRECTOR	0.40	X			<u> </u>	ļ	<u> </u>	0.	0.	0.	
(3) QUEEN RANIA AL-ABDULLAH											
DIRECTOR	0.40	X	-			_		0.	0.	0.	
(4) SIR DAVID BELL											
DIRECTOR	0.40	X	-					0.	0.	<u> </u>	
(5) BILL CONN											
DIRECTOR	0,40	X						0,	0.		
(6) RAGHDA EL EBRASHI											
DIRECTOR	0.40	х						0.	0.	0.	
(7) OLIVIER FLEUROT	1										
DIRECTOR	0.40	X	-					0,	0.	0.	
(8) HENRIETTA HOLSMAN FORE		1									
DIRECTOR	0.40	X		<u> </u>				0.	0.	0.	
(9) ENRIQUE V. IGLESIAS				ŀ							
DIRECTOR	0.40	Х	<u> </u>					0.	0.	0,	
(10) RICK R. LITTLE											
DIRECTOR	0.40	X				<u> </u>		0.	0.	<u>0.</u>	
(11) JOE MATALON											
DIRECTOR	0.40	X						0.	0.	0.	
(12) HELIO MATTAR		ľ									
DIRECTOR	0.40	X	<u> </u>					0.	0.	<u> </u>	
(13) HELEN OSTROWSKI											
DIRECTOR	0.40	X						0.	0.	0.	
(14) VELI SUNDBACK											
DIRECTOR	0.40	X	<u> </u>					0.	. 0.		
(15) CONNIE WONG											
DIRECTOR	0.40	х	<u> </u>	<u> </u>	ļ			0.	0.	0.	
(16) PETER WOICKE		1									
DIRECTOR	0.40	Х				\sqcup		0.	0.	0.	
(17) WILLIAM S. REESE											
PRESIDENT/CEO	40,00	X.		X_	L			296,213.	0.	37, 337, Form 990 (2011)	

Form 990 (2011) INTERNATIONAL	YOUTH FOU	NDA	TIO	N					38-293			F	age 8
Part VII Section A. Officers, Directors, Tru	stees, Key E	mple	оуеє	es, a	nd l	High	ıest	Compensated Employ	ees (continued)				
(A) Name and title	(B) Average hours per week	box	not o	Pos check ass pend a c	more erson	than is bo	th an		(E) Reportable compensatie from relate	ation		(F) stimat mount other	t of r
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatior (W-2/1099-MI	f org an	npensa rom th ganiza id rela anizat	ne ition ited	
(18) SAMANTHA BARBEE													
CFO	40.00			х	<u> </u>			165,670.		0.		20	,150,
(19) G. PETER SHIRAS	40.00			l		١,,		24.0 0.0		•		4.0	200
(20) AWAIS SURT	40.00	 			├~	X	╁	210,997.		0.		19	,298,
(20) AWAIS SUFI VP_ PROGRAMS	40.00	-				x		177,223.		0.		3.2	.197
(21) JIM PEIRCE	40.00					Α.		111,225,		<u> </u>			,131.
VP STRATEGIC PLANNING &	40.00					x		154,291.		0.		19	,208.
(22) SUSAN PEZZULLO						<u> </u>		204,552.					, 200.
LEARNING DIRECTOR	40.00					x	İ	145,649.		٥.		28	,525,
(23) JACK BOYSON	,							•					
PROGRAM DIRECTOR	40.00					х		123,569,		0.		21	,520.
1h Cub total								1 272 (12				170	225
1b Sub-total continuation sheets to Part VI								1,273,612.		0. 0.		178	,235.
d Total (add lines 1b and 1c)								1,273,612.		0.		179	<u>0.</u> .235.
Total number of individuals (including but n						e) wi	no ri		000 of reportab			170	,233.
compensation from the organization									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si													
4 For any individual listed on line 1a, is the su	m of reportab	 le co	 amo	 ensa	ation	and	d ot	her compensation from t	the organization		3		X
and related organizations greater than \$150											4	x	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	olete Schedul	e J f	or si	ıch	pers	on .					5	<u></u>	x
Section B. Independent Contractors													
 Complete this table for your five highest con 	-	-								npens	ation 1	rom	
the organization. Report compensation for t	he calendar y	ear e	endi	ng w	vith (or w	ithir	the organization's tax y	ear.				
(A) Name and business	address							(B) Description of s	ervices	С		C) nsatio	n
QUICKSAND DESIGN STUDIO PRIVAT, D-29,	LGF,						4	PROGRAM SUPPORT/MOI	NTIORING &				
GREATER KAILASH II ENCLAVE, NEW DELHI	,						-	EVALUATION				292	,005.
FUNDACAO ABRINQ PELOS DIREITOS													
VILLA NOVA CONCEICAO, SAO PAULO, BRAZ	<u>IL</u>						-	PROGRAM SUPPORT			<u> </u>	106	<u>.558.</u>
							1						
							\dashv				7		
Total number of independent contractors (in \$100,000 of compensation from the organize)	•	ot lir	nite	d to		se lis 2	sted	above) who received m	ore than				

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded fro tax under sections 51 513, or 51
15 ST	1 a	Federated campaigns	1a	9.15	. 0			
Contributions, Girts, Grants and Other Similar Amounts		Membership dues						ikilili (i
٦Ě	С			;				
声	d	-						
Ϋ́Ε	е)4			
ξv		All other contributions, gifts, grants	_	21,000,00				
		similar amounts not included above	-	5,400,07				
ξÖ	g			7,400,07	*			
호티	_	Total. Add lines 1a-1f		<u> </u>	26 942 234			
- 1		Total, Add into ta 11		Business Co	10.000000000000000000000000000000000000			
9	2 a	CONTRACT REVENUE		900099	398,291	398,291	- India da Pillandala Isaaci edibila	
2		PUBLICATION SALES		900099		·		
돌				900099	210	210	***************************************	
E S	C					 		
	d			_				1
Revenue	e	All other program continues						
-	f	All other program service reven			309 501	THE CONTROL OF THE CO	i daga ke dika sa sa ili da ka ji	
+	9	Total. Add lines 2a-2f			398,501			
	3	Investment income (including of	-	•				
	_	other similar amounts)			199,079	•		199,0
	4	Income from investment of tax-	-		<u> </u>			
	5	Royalties			■ 1700 (1817) Beat 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 . The control of the case of	De en la companya
			(i) Real	(ii) Persona				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)			>			
-	7 a	Gross amount from sales of	(i) Securit	ies (ii) Other				
		assets other than inventory	3,574,5	527.				
	b	Less: cost or other basis						
		and sales expenses	3,228,1		_############			
		Gain or (loss)						
		Net gain or (loss)			346,425	•		346,4
Other Revenue	8 a	Gross income from fundraising including \$	events (no	t				
اق		contributions reported on line 1	c). See					
<u></u>		Part IV, line 18		. а				
Ĕ	b	Less: direct expenses		. b				
١	С	Net income or (loss) from fundra	aising ever	nts	-			
	9 a	Gross income from gaming acti	vities. See					
		Part IV, line 19		, a				
	b	Less: direct expenses						
-	С	Net income or (loss) from gamir	ng activities	·	>			
		Gross sales of inventory, less re	_					
		and allowances		a				
	b	Less: cost of goods sold						
		Net income or (loss) from sales			-		je sise tenjoh dahidalamidian meli dat dan tra	Ku
T		Miscellaneous Revenue		Business Co	de Company			
r	11 a	GRANT REFUNDS		900099	569,519	569,519.		
		OTHER INCOME		900099	2,688	, 303,313.		2,6
		OTHER INCOME			2,000	•		4,0
	ن د	All other revenue		_		<u> </u>		
		All other revenue			550.000		i underek la basser e k. e. d.	
		Total Add lines 11a-11d			572,207	, May of Habiti than 1750 yo A. C.		
- 1	12 9 12	Total revenue. See instructions			28,458,446	968,020,	0.	548_1 Form 990 (20

Form 990 (2011) INTERNATIONAL YOUTH FOUNDATION Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6	a response to any question in to (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1 Grants and other assistance to governments a				
organizations in the United States. See Part IV	· ———	344,330		
2 Grants and other assistance to individua				
the United States. See Part IV, line 22	173,370	. 173,370	, domovnosti i oblani je gjenjige Agobej Pradinje, i niji i njenjih oblazagje Adoli	King ne in Lawin Pin Consent de la Salas. Cardinario de parte a cardente de la terra
3 Grants and other assistance to governm	·			
organizations, and individuals outside th United States. See Part IV, lines 15 and				
4 Benefits paid to or for members		7,726,207		
5 Compensation of current officers, direct			jig na selini e iliye, katil Al-Nukse Kuk	
trustees, and key employees			545 505	
6 Compensation not included above, to disquali			515,787.	
persons (as defined under section 4958(f)(1)	l l			
persons described in section 4958(c)(3)(B)	1			
7 Other salaries and wages		5 071 002	1 010 006	500 000
8 Pension plan accruals and contributions (notur		5,271,093	1,219,286.	572,080
		242 102	104 001	40.110
section 401(k) and section 403(b) employer contribution Other employee benefits	, 	1		,
		1	· ·	,
	425,359	269,781.	116,224.	39,354
• • • •				
a Management		01.610	07.060	
b Legal		ή	27,060.	''
c Accounting		6,957,	79,110.	
d Lobbying				
e Professional fundraising services. See Part IV f Investment management fees		once cuerce et esea - 1944-1971 i		
			35,121.	
g Other		2,929,510,	51,126.	3,692
12 Advertising and promotion		FF1 01F	000 704	0.500
13 Office expenses		'	222,724.	9,798
14 Information technology		11,607.	57,413.	<u></u>
15 Royalties	l l	205 070	F2F 200	
16 Occupancy	1		535,289,	55 500
17 Travel		1,433,720.	104,828.	67,780
18 Payments of travel or entertainment experience of travel or entertainment experience of the control of the c				
for any federal, state, or local public offic		402.000	54 548	
19 Conferences, conventions, and meetings		403,009.	51,567.	3,823
20 Interest				
21 Payments to affiliates22 Depreciation, depletion, and amortization			0.4.054	
			34,251.	<u> </u>
23 Insurance 24 Other expenses, Itemize expenses not covered	Entra the factor of the factor		8,673.	
24 Other expenses, itemize expenses not covered above. (List miscellaneous expenses in line 24				
24e amount exceeds 10% of line 25, column (
amount, list line 24e expenses on Schedule O.		ha Madhar a sonna <u>nga ang</u>	<u>Luccina il inunuduos viu entern</u>	EEFERHA ALVA <u>Light KEri</u> L
a PARTICIPANT SUPPORT	98,321.	98,321.		
b <u>UNALLOWABLE COSTS</u>	78,100.	75,953.	1,719.	428
c MEMBERSHIP DUES	56,494.	1,569.	54,605.	320
d BAD DEBT	22,328.	20,905.	1,423.	
e All other expenses	25,219.	21,288.	3,772.	159
25 Total functional expenses. Add lines 1 throug		20,699,058.	3,430,627.	820,874
Joint costs. Complete this line only if the orga				
reported in column (B) joint costs from a comi				
educational campaign and fundraising solicitat Check here if following SOP 98-2 (ASC 95)	1			
	9 700\ i	I		

				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		******************************	201.	1	351
2					2	6,360,294
3						23,086,226
4						60,512
5					11,000	
			• •			
					5	in Libbidia and to see the first transfer and the second s
6						
			-			
				initial designation of the second control of	6	
7					 	523,417
8	Inventories for sale or use			,	1	020, 22,
9					1	455,524
10a		1	***************************************			
		10a	429 97			
ь			···		100	20,482
						7,503,193
						270,124
						270,124
					1	
	Other assets See Part IV line 11		••••••	1 000 844	1	858,705
						39,138,828
						1,041,025
						237,241
						511,061
						311,001
		•	•		20	
23	***************************************					
						200 000
				200,000.	24	200,000
	0.1.1.1.0	•	•		25	
26	***************************************					1,989,327,
LU				7,720,002,	20	######################################
			and complete			
	- ,			10 219 181	27	10,448,537.
						1
						25,736,758. 964,206.
	-			031,502.	20	304,200
	complete lines 30 through 34.	COR IIC	c pand			
	Capital stock or trust principal, or current funds				30	and the second s
					31	
	- Paid-in or capital surplus, or land, building, or equ				ונטי	1
31	Paid-in or capital surplus, or land, building, or equ					-
31 32	Paid-in or capital surplus, or land, building, or equivalent earnings, endowment, accumulated incomment assets or fund balances	ome, c	other funds		32	37,149,501.
	2 3 4 5 6 7 8 9 10a	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, diemployees, and highest compensated employee of Schedule L 6 Receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section employees' beneficiary organizations (see instrue Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 1 Investments - program-related. See Part IV, line 1 Intangible assets 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Felayables to current and former officers, director highest compensated employees, and disqualific of Schedule L 23 Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay parties, and other liabilities not included on lines Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check he lines 27 through 29, and lines 33 and 34. 10 Unrestricted net assets 21 Permanently restricted net assets 22 Permanently restricted net assets 23 Organizations that do not follow SFAS 117, check he lines 27 through 29, and lines 33 and 34.	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, the employees, and highest compensated employees. Complete of Schedule L 6 Receivables from other disqualified persons (as defined the 4958(f)(1)), persons described in section 4958(c)(3)(B), and employers and sponsoring organizations of section 501(in employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34') 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Payables to current and former officers, directors, truster highest compensated employees, and disqualified perso of Schedule L 23 Secured mortgages and notes payable to unrelated third payables to current and loans payable to unrelated third payables to oparties, and other liabilities not included on lines 17-24). Cother liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34. 24 Unrestricted net assets 25 Permanently restricted net assets 26 Permanently restricted net assets 27 Permanently restricted net assets 28 Temporarily restricted net assets 39 Permanently restricted net assets 30 Organizations that do not follow SFAS 117, check here	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 39 Permanently restricted net assets 40 Permanently restricted net assets 40 Permanently restricted net assets 41 Permanently restricted net assets 42 Permanently restricted net assets	1 Cash - non-interest-bearing 201. 20 Savings and temporary cash investments 5,367,478, 3 Pledges and grants receivable, net 21,548,612, 4 Accounts receivable, net 64, 137, 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 7 Receivables from other disqualified persons (as defined under section 4958(0)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) 7 Notes and loans receivable, net 651, 642. 8 Inventories for sale or use 63, 892, 10a 429, 977. b Less: accumulated depreciation 10b 409, 495, 54, 734, 11 Investments - publicity traded securities 7, 802, 031. 1 Investments - publicity traded securities 7, 802, 031. 1 Investments - publicity traded securities 7, 802, 031. 1 Investments - publicity traded securities 7, 802, 031. 1 Investments - publicity traded securities 7, 802, 031. 1 Investments - publicity traded securities 8, 802, 931. 1 Investments - publicity traded securities 9, 10a 429, 977. 1 Investments - publicity traded securities 9, 10a 429, 977. 1 Investments - publicity traded securities 9, 10a 429, 977. 1 Investments - publicity traded securities 9, 10a 429, 977. 2 Investments - publicity traded securities 9, 10a 429, 977. 2 Investments - publicity traded securities 9, 10a 429, 977. 2 Investments - publicity traded securities 9, 10a 429, 977. 2 Investments - publicity traded secur	1

Form 990 (2011)

b 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.

Form 990 (2011)

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

Complete if the organization is a section ου τίσησ) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

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

2011 Open to Public	OMB No. 1545-0047
	2011
	4011
	Open to Public
	Inspection

Name of t	he organizat	ion							Employer id	dentificat	ion number
. B		INTERNATIO	NAL YOUTH FOUNDATI	ON					38	2935397	<u></u>
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

Schedule A (Form 990 or 990-EZ) 2011 INTERNATIONAL YOUTH FOUNDATION 38-2935397 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.)

2 Tax revenues levide 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 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtreat line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 1 Total support. Add lines 7 through 10 2 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2010 Schedule A, Part II, line 14 15 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)	Se	ction A. Public Support		-				
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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

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	20							,

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Name of the organizati	on	Employer identification number
	INTERNATIONAL YOUTH FOUNDATION	38-2935397
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	x 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	1
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule. I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe	ecial Rule. See instructions.
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more	re (in money or property) from any one
contributor. Co	mplete Parts I and II.	
Special Rules		
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of to 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one one of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III.	
contributions fo If this box is che purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one r use exclusively for religious, charitable, etc., purposes, but these contributions did ecked, enter here the total contributions that were received during the year for an ext complete any of the parts unless the General Rule applies to this organization becable, etc., contributions of \$5,000 or more during the year.	not total to more than \$1,000. **Clusively religious, charitable, etc., cause it received nonexclusively
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schoon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or or each the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Paperwork Re	duction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Scho	edule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of org	anization	Em	ployer identification number
INTERNATI	ONAL YOUTH FOUNDATION		38-2 <u>9</u> 35397
Part I	Contributors (see instructions). Use duplicate copies of Part I if addi		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 827,338	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 17,804,848	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$\$	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$1,329,893	Person x Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$601,080	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
123452 01-23-1	12	Schedule B (For	m 990, 990-EZ, or 990-PF) (2011)

Name of org	panization	Employer identification number			
,	IONAL YOUTH FOUNDATION		38-2935397		
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution		
7		\$\$	Person x Payrol! Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution		
,		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) _No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II if there		
			is a noncash contribution.)		

123452 01-23-12

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization Employer identification number

INTERNAT	IONAL YOUTH FOUNDATION	38-	2935397
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of or	ganization		Employer identification number
INTERNAT Part III	FIONAL YOUTH FOUNDATION Exclusively religious, charitable, etc., indi year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	vidual contributions to section 501(c the following line entry. For organizatio tc., contributions of \$1,000 or less for tal space is needed	38-2935397)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter the year. (Enter this information once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif	t Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	<u> </u>
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number

	INTERNATIONAL YOUTH FOUNDATION		38-2935397
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Sin	nilar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	(a) Donor advised for	unds ((b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the assets held	in donor advised fun	ds
	are the organization's property, subject to the organization's exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant		
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any of	other purpose confe	ring
	impermissible private benefit?	***************************************	Yes No
Pai	rt II Conservation Easements. Complete if the organization answered "Yes" t	o Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
	Preservation of land for public use (e.g., recreation or education)	ation of an historical	ly important land area
		ation of a certified hi	storic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	on in the form of a co	onservation easement on the last
	day of the tax year.		F
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure included in (a)		2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extinguished, or terr	ninated by the organ	ization during the tax
	year >		
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, inspection	•	
_			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	-	-
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of		
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue	· ·	
	include, if applicable, the text of the footnote to the organization's financial statements the	iat describes the org	gartization s accounting for
Par	conservation easements. rt III Organizations Maintaining Collections of Art, Historical Treas	ures or Other !	Similar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	dice, or other	
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re	evenue statement ar	nd halance sheet works of art
	historical treasures, or other similar assets held for public exhibition, education, or resear		·
	the text of the footnote to its financial statements that describes these items.		public dervice, provide, itt i are xtv,
h	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its rever	nue statement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furth		
	relating to these items:		ther, previous the renewing amounts
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or other similar asse		
_	the following amounts required to be reported under SFAS 116 (ASC 958) relating to the		r
а	B		▶ \$
	Assets included in Form 990, Part X		
-	,		*

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

		NAL YOUTH FOUNDA		·			38-2935			<u> 2 'age</u>
Pa	rt III Organizations Maintaining C	collections of Ar	t, Historical Tı	reasures,	or Oth	er Simil	ar Asse	ts (con	tinueo	<u>) </u>
3	Using the organization's acquisition, access	on, and other record	s, check any of the	following th	at are a s	significant	use of its	collection	on iten	18
	(check all that apply):									
а	Public exhibition	d	Loan or exc	change prog	rams					
b	b Scholarly research e Other									
С	Preservation for future generations									
4	Provide a description of the organization's ca	ollections and explair	n how they further t	the organizat	ion's exe	empt purpo	ose in Par	t XIV.		
5	During the year, did the organization solicit of	r receive donations o	of art, historical trea	asures, or oth	ner simila	r assets				
	to be sold to raise funds rather than to be m							Yes		No
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the organization	on answered	"Yes" to	Form 990	, Part IV,	line 9, o	r	
1a	ls the organization an agent, trustee, custod		iary for contribution	ns or other a	ssets not	t included				
	on Form 990, Part X?							Yes		No
h	If "Yes," explain the arrangement in Part XIV				• • • • • • • • • • • • • • • • • • • •	••••••		7 163		7 140
	ii 100, Oxplain the arrangement in Fart XIV	and complete the for	lowing table.					Amour	nt .	
С	Beginning balance					1c		7 111001	11.	
d	A 1 Mar.									
e										
f	Ending balance									
	Did the organization include an amount on F							Yes		No
	If "Yes," explain the arrangement in Part XIV.				• • • • • • • • • • • • • • • • • • • •			_ 163	_	7 140
	rt V Endowment Funds. Complete i		swered "Yes" to Fo	rm 990. Parl	IV. line 1	10.				
		(a) Current year	(b) Prior year	(c) Two year		(d) Three y	ears hack	(e) For	ır vears	hack
1a	Beginning of year balance	26,032,746.	18,568,787		8,812.		41.323.	(6) 100	n yours	DUCK
b		24,062,308.	26,142,227	1	4,519.	-	72.181.	eritati e		
C		24,002,300.	40,142,221	13,54	4,313.	10,0	12,101,		<u>11,21 , 22 </u>	
ď			·				•	The state of		
	Other expenditures for facilities									
C	and programs	21,394,090.	18,678,268,	10 06	4,544.	21 0	04,692.			
f	Administrative expenses	21,394,090.	10,070,200	10,30	4,344,		04,092.			
		28,700,964.	26.032.746.	10 56	8,787.	17 6	08,812.			
2	Provide the estimated percentage of the curr			•	0,/0/.	17,0	00,012.	B+ 4 (D+++-1)	1 1 2 1 1 1 1	
	Board designated or quasi-endowment	6.97	%	ajj field as.						
b		%	_70							•
	Temporarily restricted endowment	89.67 %	•							
•	The percentages in lines 2a, 2b, and 2c shou									
22	Are there endowment funds not in the posse		tion that are held a	and administs	ared for t	he organia	ation			
Ja	by:	osion of the organiza	don tratale neig a	uita dalliiliiliste	sied for t	ne organiz	ation		Yes	No
	•							226)	163	
	**							3a(i)		X
h	(ii) related organizations	listed as required or	Schodula P2					3a(ii) 3b		X
4	Describe in Part XIV the intended uses of the			***************************************	•••••			Su	J	L
_	t VI Land, Buildings, and Equipm									
-	Description of property	(a) Cost or ot	<u> </u>	or other	(a) A	ccumulate	.d	(d) Boo	sk valu	
	Description of property	basis (investm	, ,	(other)		preciation	"	(1) 1500	n valu	e
10	l and	- 	, , ,	·		prediation				
	Land				11218	<u> </u>				
	Buildings Legsphold improvements									
	Leasehold improvements			400 000		400	405			
	Equipment			429,977.		409,	493.		20	<u>482.</u>
	Other		/ calumn (D) line :	(A(a))				 -		400
otal	. Add iines Ta through Te. (Column (a) must e	<u> μααι Ευππ 990, ΡΆΠ Σ</u>	, column (B), line 1	U(C).)					20	482.

Schedule D (Form 990) 2011

Part VII Investments - Other Securities.	See Form 990, Part X, line 12.			
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valu Cost or end-of-year ma	
(1) Financial derivatives				
(2) Closely-held equity interests			 ,,-	
(3) Other				
(A)				
(B)				
(C)				-
(D)				·
(E)				· · · · · · · · · · · · · · · · · · ·
(F)(C)				
(G) (H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	>			
Part VIII Investments - Program Related				
(a) Description of investment type	(b) Book value		(c) Method of value Cost or end-of-year ma	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				.
(8)				
(9) (10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶	_			
Part IX Other Assets. See Form 990, Part X, II			The Control of the Co	and the second s
	(a) Description			(b) Book value
(1)				
(2)			···········	B-0
(3)	•			
(4)	· · · · · · · · · · · · · · · · · · ·			
(5) (6)				
(7)		-		
(8)				
(9)			···	
(10)	· · · · · · · · · · · · · · · · · · ·			
Total. (Column (b) must equal Form 990, Part X, col (B)	line 15.)		>	
Part X Other Liabilities. See Form 990, Part		N.D. aleesakee	In the second of the second	
(a) Description of liability	- (c) Book value		
(1) Federal income taxes				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	line (IE)			
Total. (Column (b) must equal Form 990, Part X, col (B) I FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnot FIN 48 (ASC 740).	e to the organization's financial statemen	nts that reports the org	ganization's liability for uncerta	in tex positions under
32053 1-23-12				edule D (Form 990) 2011
				•

	edule D (Form 990) 2011 INTERNATIONAL YOUTH FOUNDATION	4 . 171	15:		2935397	Page 4
نسبت	rt XI Reconciliation of Change in Net Assets from Form 990 to			tateme		
1	Total revenue (Form 990, Part VIII, column (A), line 12)					28,458,446.
2	Total expenses (Form 990, Part IX, column (A), line 25)					24,950,559.
3	Excess or (deficit) for the year. Subtract line 2 from line 1					3,507,887.
4	Net unrealized gains (losses) on investments		4			<u>-485,318.</u>
5	Donated services and use of facilities					
6	Investment expenses					
7	Prior period adjustments					
8	Other (Describe in Part XIV.)					-124 <u>995</u>
9	Total adjustments (net). Add lines 4 through 8					-610,313.
10 Pa	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and TXII Reconciliation of Revenue per Audited Financial Stateme			er Retu	ırn	2,897,574,
1	Total revenue, gains, and other support per audited financial statements			1		27,268,453.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	-485,	318.		
b	Donated services and use of facilities		·			
С	Recoveries of prior year grants					
ď	Other (Describe in Part XIV.)		-100,	035.	: :- :: :-	
е	Add lines 2a through 2d		,	2e		-585,353,
3	Subtract line 2e from line 1			3		27,853,806.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			F	V.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35	121.		
b	Other (Describe in Part XIV.)		569			
C	Add lines 4a and 4b				:	604,640.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)					28 458 446.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme					,,
1	Total expenses and losses per audited financial statements		-	1		24,343,435.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		***************************************			
а	Donated services and use of facilities	2a				
b	Prior year adjustments					
c	Other losses					
ď	Other (Describe in Part XIV.)		-572	003	H	
e	Add lines 2a through 2d		····			572,003.
3	Subtract line 2e from line 1					24,915,438.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					<u>24,713,430.</u>
ล	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35	121.		
h	Other (Describe in Part XIV.)	1		101.		
r n				4c		25 101
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					35,121.
1	TXIV Supplemental Information	************	••••••	3		<u>24,950,559,</u>
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	lines 1a	and 4: Part IV lir	nes 1h an	d 2h: Part \	/ line 4: Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp		-			
	V. LINE 4: THE IYF ENDOWMENT IS A COMBINATION OF BOARD DESIGNA	-	sait to provide an	y addition	iai iiioiiiat	1011.
FARI	V, BIRE 4; THE TIP ENDOWMENT IS A COMBINATION OF BOARD DESIGNA	TED				
FUNI	S AS WELL AS PERMANENTLY RESTRICTED DONOR CONTRIBUTIONS WHICH W	ILL BE				
INVE	STED IN PERPETUITY, THE INCOME OF THE ENDOWMENT WILL BE RELEAS	ED FOR				
USE	TO SUPPORT THE OPERATIONAL NEEDS OF THE ORGANIZATION,					
		·	<u> </u>			
PART	X, LINE 2: ON JANUARY 1, 2009, THE ORGANIZATION ADOPTED THE					
ACCO	UNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSE	S THE				
<u>DE</u> TE	RMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLA	IMED ON	V			
13205				Sch	edule D (Fo	orm 990) 2011
01-23-	12					

Schedule D (Form 990) 2011 INTERNATIONAL YOUTH F Part XIV Supplemental Information (continued)	FOUNDATION	38-2935397	Page 5
	DAMENING INDER MITC		
A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL ST	-		
GUIDANCE, THE ORGANIZATION RECOGNIZES THE TAX BENEF	IIT FROM AN UNCERTAIN		
TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THA	AT THE TAX POSITION WILL		 .
BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES,	BASED ON THE TECHNICAL		
MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED	IN THE FINANCIAL		
STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED	ON THE LARGEST BENEFIT	·	
THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BE	ING REALIZED UPON		
ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR	UNCERTAINTY IN INCOME		
TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION	INTEREST AND		
PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERI	M PERIODS.		
MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITION	NS AND CONCLUDED THAT		
THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIO	NS THAT REOUIRE		
ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WI			

THIS GUIDANCE, WITH FEW EXCEPTIONS, THE ORGANIZATION			
TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STA	TE OR LOCAL TAX		
AUTHORITIES FOR YEARS BEFORE 2007.			
			
PART XI, LINE 8 - OTHER ADJUSTMENTS:	· · · · · · · · · · · · · · · · · · ·		
FOREIGN CURRENCY GAIN (LOSS)	-124,995.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:			
GAIN ON (LOSS) FOREIGN CURRENCY	-124,995.		
CONSOLIDATED ENTITY ACTIVITIES	24,960.		
TOTAL TO SCHEDULE D, PART XII, LINE 2D	-100,035.		
PART XII, LINE 4B - OTHER ADJUSTMENTS:			
GRANT REFUNDS REPORTED ON LINE 11A	569,519.		
132055 01-23-12		Schedule D (Forn	n 990) 2011
V1 EV 1E	25		

Schedule D (Form 990) 2011 INTERNATIONAL YOUTH FOUN	DATION	38-2935397	Page 5
Schedule D (Form 990) 2011 INTERNATIONAL YOUTH FOUN Part XIV Supplemental Information (continued)			
PART XIII, LINE 2D - OTHER ADJUSTMENTS:			
CONSOLIDATED ENTITY ACTIVITIES	-2,484.		
GRANT REFUNDS REPORTED ON LINE 11A	-569,519.		
TOTAL TO SCHEDULE D, PART XIII, LINE 2D	-572,003.		
•			

			<u>.</u>
		_	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990. ➤ See senarate instructions.

2011
Open to Public-Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

Copen to Public Inspection

Employer identification number

INTERNATIONAL YOUTH FO					38-2935397	
		Activities Ou	tside the United States. Comp	lete if the organ	ization answered "	Yes"
to Form 990, Par						
 For grantmakers. Does 	the organization	n maintain recor	ds to substantiate the amount of its gr	ants and other	assistance,	
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance?x	Yes No
2 For grantmakers, Desc	ribe in Part V the	organization's	procedures for monitoring the use of it	ts grants and ot	her assistance outs	side the
United States.				J		
	he following Part	t L line 3 table c	an be duplicated if additional space is	needed \		
(a) Region	(b) Number of	,	(d) Activities conducted in region	1	vity listed in (d)	(f) Total
(a) region	offices	l émployees.	(by type) (e.g., fundraising, program		ram service,	expenditures
·	in the region	agents, and independent	services, investments, grants to		specific type	for and
	in the region	contractors	recipients located in the region)		e(s) in region	investments
		in region	respirite results in the region,	0, 00, 7,0		in region
EAST ASIA AND THE				YOUTH DEVEL	OPMENT	
PACIFIC	1	5	PROGRAM SERVICES	PROGRAMS		192,964.
						,
MIDDLE EAST AND				YOUTH DEVEL	ODMENIM	
					OPMENT	
NORTH AFRICA	2	47	PROGRAM SERVICES	PROGRAMS		2,833,837.
	1					
RUSSIA & THE NEWLY				YOUTH DEVEL	OPMENT	
INDEPENDENT STATES	1	9	PROGRAM SERVICES	PROGRAMS		191,638.
				YOUTH DEVEL	OPMENT	
SUB-SAHARAN AFRICA	1	10	PROGRAM SERVICES	PROGRAMS		615,117.
					·····	
						į
CENTRAL AMERICA AND						
THE CARIBBEAN	ار ا	0	 GRANTS			1,116,500.
THE CARIBBEAN	<u>v</u>		GRANIS			1,110,500.
EAST ASIA AND THE		_				
PACIFIC	0	0	GRANTS			611,016.
EUROPE (INCLUDING						
ICELAND & GREENLAND)	0	0	GRANTS			30,812.
MIDDLE EAST AND						
NORTH AFRICA	o	0	GRANTS			3,581,215.
3 a Sub-total	5	71				9,173,099.
b Total from continuation	<u>*</u>	***				
sheets to Part I	ا	0				2 214 455
		<u></u>				2,214,465.
c Totals (add lines 3a	_					
and 3b)	<u> </u>	71	<u>kan asar ista qalisi ji jijilik dan ji ayati isdiyaliyi, diji</u>	La religio de la contra	<u> 140,944 î.H. 141 î.H. 141 î.H. 1</u>	11 387 564.

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

Schedule F (Form 990) 2011

Schedule F (Form 990) Part Continuat	INTERNATIONA ion of Activitie	s per Region	IDATION N. (Schedule F (Form 990), Part I, line 3)	38-29353 <u>9</u>	Page
(a) Region	(b) Number of offices in the region	1.7	1	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA -					
CANADA AND MEXICO	0	. 0	GRANTS		353,233
RUSSIA & THE NEWLY					
INDEPENDENT STATES	0	0	GRANTS		133,627
SOUTH AMERICA	0.	n	GRANTS		1,042,142
, do in minimum.		v			1,012,112
SOUTH ASIA	0	0	GRANTS		273,849
SUB-SAHARAN AFRICA	0	0	GRANTS	,	411,614
				,	
Y-4477					
		···			
otals					2,214,465

38-2935397	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any	d more than \$5,000	
INTERNATIONAL YOUTH FOUNDATION	istance to Organizations or Entities Outside the United St	recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000	Part II can be duplicated if additional space is needed.
Schedule F (Form 990) 2011	Part II Grants and Other Assi	recipient who received	Part II can be duplicate

Page 2

	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region CENTRAL AMERICA AND THE CARIBBEAN AND THE CARIBBEAN AND THE CARIBBEAN AND THE CARIBBEAN CENTRAL AMERICA AND THE CARIBBEAN	(d) Purpose of grant grant bevelopment programs YOUTH DEVELOPMENT PROGRAMS YOUTH DEVELOPMENT PROGRAMS YOUTH DEVELOPMENT PROGRAMS YOUTH DEVELOPMENT PROGRAMS	(e) Amount of cash grant 29, 658. 29, 658. 22, 027. 22, 027.	Amount (f) Manner of ash grant cash disbursement cash disbursement cash disbursement cash disbursers 22,027, WIRE TRANSFER 23,486, WIRE TRANSFER 112,801, WIRE TRANSFER	(g) Amount of non-cash assistance 0.000.0000.00000000000000000000000000	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	117,863.	WIRE TRANSFER	0		
			CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	126,555,	WIRE TRANSFER	•0		
			CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	140,035,	140,035, WIRE TRANSFER	0		
Ø	Enter total number of the IRS, or for which t	f recipient organizatic the grantee or couns	ons listed above that are sel has provided a sectior	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-ex	cempt by		7.
C.	Enter total number of other organizations or entities	other organizations	or entities				1		

Schedule F (Form 990) 2011

Schedule F (Form 990)	INTERNAT	INTERNATIONAL YOUTH FOUNDATION	TION		38-2935397	76		Page 2
Part II Continuation o	f Grants and Other	Continuation of Grants and Other Assistance to Organizations	tions or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1)	United States,	(Schedule F (Form 9)	90), Part II, line 1)		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	63	WTRF TRANSFER	G		
		TRAL AMERICA THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	518	WIRE TRANSFER	0		
		CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	23,807.	WIRE TRANSFER	0		
		CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	191,280,	WIRE TRANSFER	. 0		
		CENTRAL AMERICA AND THE CARIBBEAN	YOUTH DEVELOPMENT PROGRAMS	113,118,	113,118, WIRE TRANSFER	0,		
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	42,368.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT	10000,1	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT	89,560,	WIRE, TRANSFER	0	7	
		EAST ASIA AND THE	YOUTH DEVELOPMENT PROGRAMS	10,000,	10,000,WIRE TRANSFER	0		

Schedule F (Form 990)	INTERNA	INTERNATIONAL YOUTH FOUNDATION	VIION		38-2935397	97		Page 2
Part II Continuation o	of Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1	(
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	10,000	WIRE TRANSFER	o		
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	439,087,	WIRE TRANSFER	0		
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	10,000,1	10,000,WIRE TRANSFER	.0		
		EUROPE (INCLUDING ICELAND & GREENLAND)	YOUTH DEVELOPMENT	30,812,	WIRE TRANSFER	0		
		MIDDLE RAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	6,642.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NOR <u>TH</u> AFRICA	YOUTH DEVELOPMENT PROGRAMS	26,446,	WIRE TRANSFER	*0		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	22,040.1	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	11,847,	11,847. WIRE TRANSFER	0		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	34,760,6	34,760.WIRE TRANSFER	0		

Schedule F (Form 990)	INTERNAT	INTERNATIONAL YOUTH FOUNDATION	ATION		38-2935397	97		Page 2
Part II Continuation o	f Grants and Other	Continuation of Grants and Other Assistance to Organizations	ations or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1	(
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE BAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	969 127	WIRE TRANSER	c		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	758.	WIRE TRANSFER			
	te distance	MIDDLE EAST AND NORTH AFRIÇA	YOUTH DEVELOPMENT PROGRAMS	1,136,132,	1,136,132, WIRE TRANSFER	o		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	44 111	WIRE TRANSFER	.0		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	29,366.	WIRE TRANSFER	•0		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	26,513.	WIRE TRANSFER	0		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	60,290,	WIRE TRANSFER	0		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	27,982.	WIRE TRANSFER	0		
		MIDDLE BAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	30, 201,	30,201,WIRE TRANSFER	0		

Schedule F (Form 990)	INTERNA	INTERNATIONAL YOUTH FOUNDATION	TION		38-2935397	97		Page 2
Part II Continuation o	f Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States. (Schedule F (Form 9	90), Part II, line 1	(
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	224,678.	WIRE TRANSFER	0		
		NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	10,000	WIRE TRANSFER	0		
		NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	118,555.%	WIRE TRANSFER	0		
		RUSSIA & THE NEWLY INDEPENDENT STATES	YOUTH DEVELOPMENT PROGRAMS	61,043,	WIRE TRANSFER	*0		
		RUSSIA & THE NEWLY INDEPENDENT STATES	YOUTH DEVELOPMENT PROGRAMS	9,608,8	608.WIRE TRANSFER	0		
		RUSSIA & THE NEWLY INDEPENDENT STATES	YOUTH DEVELOPMENT PROGRAMS	52,984.	WIRE TRANSFER	0		
		RUSSIA & THE NEWLY INDEPENDENT STATES	YOUTH DEVELOPMENT PROGRAMS	9,992,8	WIRE_TRANSFER	0		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	31,516.	WIRE TRANSFER	0		
		SOUTH AMERICA	YOUTH DEVELOPMENT	130,487.	130,487,WIRE TRANSFER	0		

(a) Name of organization and and		אווויים אין אייוים ביים	designation of the control of the co	2000		30), ratt II, III e	,	
	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	×	SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	58 464	58 464 WIRE TRANSPER	d		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	10 000	WIRE TRANSPER	o o		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	16,047,	16.047.WIRE TRANSFER	o		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	20 000.	WIRE TRANSFER	0		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	32,623,	WIRE TRANSFER	0		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	376.	WIRE TRANSFER	0.		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	89,593,	WIRE TRANSFER	0.		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	21,757.	WIRE TRANSFER	0		
	9	SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	260,657.8	260,657,WIRE TRANSFER	0	; ;	e de la companya de l

Schedule F (Form 990)	INTERNAT	INTERNATIONAL YOUTH FOUNDATION	MION		38-2935397	97		Page 2
Part II Continuation of	of Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9)	30), Part II, line 1	(
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	XOUTH DEVELOPMENT	10,000	WIRE TRANSFER	o		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS		WIRE TRANSFER	o	1	
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	10,000,1	10.000, WIRE TRANSFER	. 0		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	31,724.	WIRE TRANSFER	0		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	202,726.)	WIRE TRANSFER	0	İ	
		SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	10,000,	WIRE TRANSFER	0		
		SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	168,077.	WIRE TRANSFER	0	,	
		SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	10,000,	10,000,WIRE TRANSFER	0		
		SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	9,634,	9.634 WIRE TRANSFER	0		

Schedule F (Form 990)	INTERNAT	INTERNATIONAL YOUTH FOUNDATION	ATION		38-2935397	16		Page 2
Part II Continuation o	of Grants and Other	Continuation of Grants and Other Assistance to Organizations	ations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States,	(Schedule F (Form 9	90), Part II, line 1	(
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	10,000	WIRE TRANSFER	0		
		SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	66,138,	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	44,675,	44,675, WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	102,315,	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	9,864,	WIRE TRANSFER	0.0	·	+
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	5,093,	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	10,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	18,093,	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	1.088.6	9,880,WIRE TRANSFER	.0		

Schedule F (Form 990)	INTERNAT	INTERNATIONAL YOUTH FOUNDATION	ATION	,	38-2935397	197	-	Page 2
Part II Continuation o	of Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States. ((Schedule F (Form 9)	90), Part II, line 1)		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	185,539,8	WIRE TRANSFER	o		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	9,000.9	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	10,156.8	WIRE TRANSPER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	10,000.8	10,000.WIRE TRANSFER	0		

Schedule F (Form 990) 2011

INTERNATIONAL YOUTH FOUNDATION

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Page 3

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	EAST ASIA AND THE PACIFIC	1.0	39,694.	WIRE TRANSFER	0		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	NORTH AMERICA	1.5	31,725,	WIRE TRANSFER	0		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	EUROPE (INCLUDING ICELAND & GREENLAND)	10	41. 501.	WIRE TRANSFER	0		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	EUROPE (INCLUDING ICELAND & GREENLAND)	10	35,000.	35,000,WIRE TRANSFER	.0		
	J						
							1.0
	į						

Schedule F (Form 990) 2011

for Form 5713) ______ x Yes No

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2011

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Schedule F (Form 990) 2011 INTERNATIONAL YOUTH FOUNDATION Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column
c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
SCHEDULE F, PART I, LINE 2: IYF'S GRANT MONITORING PLAN IS DETERMINED
DURING THE PROGRAM DESIGN PHASE WITH A COMPREHENSIVE FIDUCIARY AND
PROGRAMMATIC DUE DILIGENCE PROCESS, IYF PROGRAM STAFF WORK CLOSELY WITH
ALL GRANTEES DURING THE PROGRAM DESIGN PHASE TO ENSURE THAT THE GRANTEE
IS ABLE TO DELIVER ON THE PROGRAM. ANY ASSESSED PROGRAM WEAKNESSES ARE
NOTED AND APPROPRIATE PLANS ARE MADE TO ADDRESS THESE DURING THE PROJECT
IMPLEMENTATION PHASE.
FIDUCIARY DUE DILIGENCE INCLUDES A REVIEW OF THE GRANTEE'S ORGANIZATIONAL
DOCUMENTS AND AUDITED FINANCIAL STATEMENTS, AS WELL AS A PRE-AWARD
QUESTIONNAIRE WHICH ASSESSES INSTITUTIONAL CAPACITY. ADDITIONALLY, THE
BOARD AND KEY STAFF ARE VETTED AGAINST SEVERAL LISTS TO COMPLY WITH
PATRIOT ACT AND DEBARMENT RULES. THE DUE DILIGENCE REVIEW RESULTS IN A
DOCUMENTED RISK ASSESSMENT AND RECOMMENDED MONITORING PLAN, WHICH ARE
THEN USED TO DETERMINE REPORTING FREQUENCY. LOW RISK GRANTEES NORMALLY
REPORT BOTH PROGRAMMATICALLY AND FINANCIALLY TWICE A YEAR. HIGH RISK
GRANTEES MAY BE ASKED TO REPORT ON A MONTHLY BASIS.
ONCE A GRANTEE SUBMITS A FINAL PROPOSAL AND BUDGET, THE GRANT PROGRAM IS
APPROVED BY THE APPROPRIATE PROGRAM STAFF AS WELL AS FINANCE STAFF. THE
BOARD OF DIRECTORS HAS DELEGATED FINAL AUTHORIZATION OF ALL GRANTS TO THE
CEO. HOWEVER, THE BOARD OF DIRECTORS DOES REVIEW AND RATIFY ALL GRANT
OBLIGATIONS, AMENDMENTS AND DE-OBLIGATIONS,
FUNDS ARE DISBURSED TO GRANTEES BASED ON THE MONITORING PLAN SET UP
DURING THE DESIGN PHASE. THE FIRST DISBURSEMENT IS BASED ON EITHER
THREE-MONTH EXPENDITURE PROJECTIONS OR THE PROJECT BUDGET. ALL FUNDS

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

2011

Open to Public Inspection

Employer identification number

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

Attach to Form 990.

å (h) Purpose of grant 38-2935397 or assistance YOUTH DEVELOPMENT FOUTH DEVELOPMENT COUTH DEVELOPMENT COUTH DEVELOPMENT x Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any PROGRAMS PROGRAMS PROGRAMS PROGRAMS recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) ö Ö Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 7,372. (d) Amount of 320,002 926 9 10,000 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 501(C)(3) 501(c)(3) 501(c)(3)501(C)(3) Enter total number of other organizations listed in the line 1 table INTERNATIONAL YOUTH FOUNDATION criteria used to award the grants or assistance? 99-0266163 05-0574837 20-4708212 26-3230131 General Information on Grants and Assistance (b) EIN 1 (a) Name and address of organization DEVELOPMENT IN GARDENING or government 110 NORTH KING STREET 12338 MAILY MEDOWLANE CONSUELO FOUNDATION SUGARLAND, TX 77478 HONOLULU, HI 96817 515 BEACON STREET BOSTON, MA 02215 DENVER, CO 80218 P.O. BOX 18138 EMERGE GLOBAL Part Part

Schedule I (Form 990) (2011)

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

Page 2 Schedule I (Form 990) (2011) (f) Description of non-cash assistance 38-2935397 (e) Method of valuation (book, FMV, appraisal, other) (Form 990) (2011) INTERNATIONAL YOUTH FOUNDATION Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance ö 173,370. (c) Amount of cash grant 43 SCHEDULE I, PART I, LINE 2: PLEASE SEE SCHEDULE F, PART IV. IYF UTILIZES (b) Number of recipients 42 THE SAME PROCESS FOR MONITORING BOTH FOREIGN AND US GRANTS (a) Type of grant or assistance Schedule I (Form 990) (2011) SCHOLARSHIPS 132102 01-27-12 Part III

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Part I Questions Regarding Compensation

Employer identification number

Schedule J (Form 990) 2011

38-2935397

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	142		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.	land.		
	▼ Compensation committee			
	Independent compensation consultant x Compensation survey or study			
	Form 990 of other organizations x Approval by the board or compensation committee	7.1.3.		
	, , , , , , , , , , , , , , , , ,			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Para migraphia	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		x
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		11,100	
	, , , , , , , , , , , , , , , , , , ,			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		X
_	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ť	contingent on the net earnings of:		. Heir	
а	The organization?	6a		X
	Any related organization?	6b		Х
-	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
-	not described in lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			- 4.5
-	Regulations section 53.4958-6(c)?	9		

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

Page 2

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	retirement and other deferred compensation	Nontaxable benefits	l otal of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
1964	8	296,213.	0.	0.	22,050.	15,287.	333,550,	0
1 WILLIAM S. REESE	(E)	0.	0.	0	0.	0.	į	0
	€	165,670.	0	.0	15,132.	5,018,	185,820,	0
2 SAMANTHA BARBEE	₿	0	0	0.	0	0	0	0.
	Ξ	210,997.	0.	0.	18,826.	471.	230 294	0
3 G. PETER SHIRAS	₿	0.	0.	0	0	0		0.
	Ξ	177,223.	0	0	16,910.	15,287.	209,420.	0
4 AWAIS SUFI	⊞	0.	0.	0	0	0	0	0
	Ξ	154,291.	0	0	14,190.	5,018.	173,499.	0
5 JIM PEIRCE		0	0	0.	0.	0	0	.0
	Ξ	145,649.	0	0	13,238.	15,287.	174,174	0
6 SUSAN PEZZULLO		0	0	0.	0	0	0	0.
	Ξ							
7	(ii)							
	Ξ							
8	8					:		
	Ξ							
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	Ξ							
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	=							
11	▣							
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13								
	Ξ							
14								
	Ξ							
15	⊞							
	Ξ		į		į			
16	⊞							

Schedule J (Form 990) 2011

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number INTERNATIONAL YOUTH FOUNDATION 38-2935397 FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ELSA: LAUNCHED IN 2004 WITH SUPPORT FROM THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID), ELSA PROVIDES LEARNING AND EMPLOYMENT OPPORTUNITIES FOR AT-RISK CHILDREN AND YOUTH LIVING IN THE AUTONOMOUS REGION OF MUSLIM MINDANAO AND CENTRAL MINDANAO IN THE PHILIPPINES COMPRISED OF FIVE HIGHLY RESPECTED INTERNATIONAL AND PHILIPPINE NGOS THE ALLIANCE ENGAGES LOCAL COMMUNITIES TO IMPROVE THE EDUCATIONAL OUTCOMES OF IN-SCHOOL AND OUT-OF-SCHOOL CHILDREN AND YOUTH, AMONG ITS ACTIVITIES, ELSA BUILDS AND REPAIRS SCHOOL CLASSROOMS AND COMMUNITY LEARNING CENTERS; STRENGTHENS THE PEDAGOGICAL COMPETENCIES OF TEACHERS; ENABLES OUT-OF-SCHOOL YOUTH TO ACCESS ALTERNATIVE. ACCREDITED LEARNING PROGRAMS; PROVIDES JOB OPPORTUNITIES FOR OUT-OF-SCHOOL YOUTH; AND PROMOTES YOUTH CIVIC ENGAGEMENT AND PEACE BUILDING. REVENUE \$ 0 EXPENSES \$ 1,011,235. INCLUDING GRANTS OF \$ 759,089. YOUTHACTIONNET: YOUTHACTIONNET SUPPORTS YOUNG COMMUNITY LEADERS THROUGH SKILL-BUILDING AS WELL AS PROVIDING ACCESS TO NETWORKS, RESOURCES, AND ADVOCACY OPPORTUNITIES. THE PROGRAM OPERATES AT THREE LEVELS. THE YOUTHACTIONNET GLOBAL FELLOWSHIP TRAINS 20 YOUNG SOCIAL ENTREPRENEURS PARTICIPANTS IN THE YEAR-LONG PROGRAM REFINE THEIR LEADERSHIP SKILLS, COLLABORATE ACROSS NATIONAL BOUNDARIES, AND ADVOCATE FOR THEIR CAUSES AT THE GLOBAL LEVEL. YOUTHACTIONNET INSTITUTES OPERATE WITHIN INDIVIDUAL COUNTRIES. THESE LOCAL PROGRAMS SELECT YOUTH LEADERS TO PARTICIPATE IN AN INTENSIVE TRAINING INCLUDING A 10-12 MONTH LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011)

132211 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization INTERNATIONAL YOUTH FOUNDATION	Employer identification number
	1 30-2733371
FELLOWSHIP EXPERIENCE, ACCESS TO SMALL GRANTS, ADDITIONAL NETWORKING	
OPPORTUNITIES, AND TECHNICAL SUPPORT. YOUTHACTIONNET.ORG IS A WEB-BASED	
PLATFORM THAT PROVIDES YOUNG LEADERS WITH ACCESS TO RESOURCES,	
STRENGTHEN LEADERSHIP SKILLS, EXPAND NETWORKS, AND ADVOCATE FOR THEIR	
CAUSES.	·,
EXPENSES \$ 1,252,436. INCLUDING GRANTS OF \$ 346,898. REVENUE \$ 0.	
OTHER EDUCATION PROGRAMS:	V-0
IYF LEARNING-OTHER PROGRAMS IMPROVE THE ACADEMIC PERFORMANCE,	
KNOWLEDGE, AND SKILLS OF YOUTH AS THE FOUNDATION FOR LEADING A HEALTHY	
AND PRODUCTIVE LIFE, IYF WORKS WITH PUBLIC, PRIVATE, AND CIVIL SOCIETY	
PARTNERS TO EXPAND AND IMPROVE YOUNG PEOPLE'S ACCESS TO QUALITY AND	
RELEVANT EDUCATION, RECOGNIZING THE CRITICAL ROLE THAT TEACHERS PLAY IN	
MOTIVATING LEARNING, IYF PROVIDES TEACHERS WITH THE BEST POSSIBLE	
TRAINING TO BUILD YOUNG PEOPLE'S CREATIVITY, SELF-ESTEEM, AND	
VOCATIONAL SKILLS. AT THE CORE OF ALL IYF EDUCATION INITIATIVES ARE	
LIFE SKILLS.	· · · · · · · · · · · · · · · · · · ·
EXPENSES \$ 1,730,810. INCLUDING GRANTS OF \$ 449,255. REVENUE \$ 0.	
GLOBAL PARTNERSHIP TO PROMOTE YOUTH EMPLOYMENT & EMPLOYABILITY:	
IN 2008, WITH SUPPORT FROM THE WORLD BANK, IYF JOINED WITH THE YOUTH	
EMPLOYMENT NETWORK (YEN), THE ARAB URBAN DEVELOPMENT INSTITUTE (AUDI),	
AND THE UNDERSTANDING CHILDREN'S WORK PROJECT (UCW) TO CREATE THE	
GLOBAL PARTNERSHIP TO PROMOTE YOUTH EMPLOYMENT AND EMPLOYABILITY, ITS	<u> </u>
GOAL: TO BUILD AND DISSEMINATE EVIDENCE ON EFFECTIVE PROGRAMS AND	
APPROACHES TO HELP ADDRESS THE CHALLENGES FACING YOUNG PEOPLE IN THEIR	
TRANSITION TO WORK, TO DATE, PARTNERS HAVE LAUNCHED A RANGE OF YOUTH	
EMPLOYMENT PROGRAMS, RESEARCH INITIATIVES, AND LEARNING EVENTS IN 132212 01-23-12 Scheen	dule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
INTERNATIONAL YOUTH FOUNDATION	38-2935397
AFRICA, THE MIDDLE EAST, AND LATIN AMERICA. IYF SERVES AS THE	
SECRETARIAT FOR THE PARTNERSHIP.	
EXPENSES \$ 476,524. INCLUDING GRANTS OF \$ 30,000. REVENUE \$ 0.	
OTHER CITIZENSHIP PROGRAMS:	-16
IYF CITIZENSHIP PROGRAMS ARE GUIDED BY THE CORE CONVICTION THAT YOUNG	
PEOPLE ARE A POWERFUL AND UNTAPPED FORCE TO CREATE POSITIVE CHANGE IN	
THEIR COMMUNITIES AND NATIONS. IYF BELIEVES THAT YOUNG PEOPLE'S	
PARTICIPATION AS CITIZENS - BE IT STUDENTS, WORKERS, FAMILY OR	
COMMUNITY MEMBERS - IS FUNDAMENTAL TO BUILDING STABLE AND HEALTHY	
DEMOCRACIES. IYF PROGRAMS PREPARE YOUTH TO FULLY PARTICIPATE IN CIVIC	
LIFE BY SUPPORTING YOUTH ENGAGEMENT (VOLUNTEERISM, COMMUNITY SERVICE,	
SERVICE-LEARNING, CIVIC PARTICIPATION) AND EMPOWERMENT (LEADERSHIP,	
SOCIAL ENTREPRENEURSHIP, AND ACTIVISM).	
EXPENSES \$ 301,418. INCLUDING GRANTS OF \$ 179,836. REVENUE \$ 0.	
PROGRAM DEVELOPMENT AND SUPPORT	
EXPENSES \$ 178,691. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
	· · ·
FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:	
TANZANIA, INDIA, PHILIPPINES, JORDAN,	
KYRGYZSTAN, OTHER COUNTRY	
	.
FORM 990, PART VI, SECTION B, LINE 11: 1. FORMS TO BE COMPLETED BY	
CONTROLLER, CFO AND INDEPENDENT TAX ACCOUNTANTS	· · · · · · · · · · · · · · · · · · ·
2. FORMS REVIEWED BY IYF'S ATTORNEYS.	

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization INTERNATIONAL YOUTH FOUNDATION	Employer identification number 38-2935397
3. DRAFT FORMS REVIEWED BY REPRESENTATIVE OF INVESTMENT AND AUDIT COMMITTEE	
A. CFO AND CONTROLLER REVIEW IN DETAIL WITH LOCALLY BASED REPRESENTATIVE OF	
	-1-1-
INVESTMENT AND AUDIT COMMITTEE.	-
B. REPRESENTATIVE OF COMMITTEE SENDS ANY NECESSARY INFORMATION AND/OR	·
COMMENTS TO REST OF THE COMMITTEE WHEN THE DRAFT IS SENT TO THE COMMITTEE.	
C. COMMITTEE GIVEN 72 HOURS TO REVIEW AND RETURN ANY COMMENTS TO	· · · · · · · · · · · · · · · · · · ·
REPRESENTATIVE AND/OR CFO.	
4. FINAL VERSION OF FORMS SENT TO ENTIRE BOARD BEFORE FILING	
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST DISCLOSURE	
STATEMENTS ARE DISTRIBUTED TO STAFF AT THE BEGINNING OF EACH CALENDAR YEAR.	
THE BOARD RECEIVES THEM AT THE FIRST BOARD MEETING OF THE YEAR. THESE MUST	
BE COMPLETED AND COLLECTED WITHIN 30 DAYS. THE EXECUTIVE COMMITTEE OF IYF	
IS RESPONSIBLE FOR MONITORING COMPLIANCE WITH THE POLICY. THE COMPLETED	
STATEMENTS ARE MAINTAINED AS CONFIDENTIAL MATERIALS BY EXECUTIVE STAFF IN	
IYF'S OFFICE IN BALTIMORE.	
ANY ISSUES DISCLOSED THROUGH THE FORMS ARE REVIEWED BY THE EXECUTIVE	
COMMITTEE AND NECESSARY STEPS ARE TAKEN. IN PARTICULAR, SHOULD A BOARD	
MEMBER WORK FOR OR OTHERWISE BE INVOLVED WITH A DONOR OR VENDOR OF THE	
ORGANIZATION, THEY ABSTAIN FROM ALL RELATED DISCUSSION AND VOTE.	
SHOULD ANY STAFF PERSON FAIL TO REVEAL ANY CONFLICT OF INTEREST, THEY WOULD	,
BE TERMINATED, SHOULD ANY BOARD MEMBER FAIL TO REVEAL ANY CONFLICT OF	
INTEREST, THEY WOULD BE RELEASED FROM THEIR SERVICE ON THE BOARD.	

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization INTERNATIONAL YOUTH FOUNDATION	Employer identification number 38-2935397
FORM 990, PART VI, SECTION B, LINE 15: IYF DOES NOT TREAT COMPENSATION FOR	
OFFICERS OR OTHER KEY EMPLOYEES DIFFERENTLY FROM THE COMPENSATION OF OTHER	
STAFF.	
IT IS IYF'S PRACTICE TO TREAT COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER	
IN A SIMILAR MANNER TO THAT OF ALL STAFF COMPENSATION, IYF ESTABLISHES AND	
MAINTAINS SALARY LEVELS THAT ARE COMPETITIVE IN RELATION TO THE MARKETS	
WITHIN WHICH IT COMPETES FOR EMPLOYEES, IYF AIMS TO KEEP ALL SALARY RANGES	
COMPARABLE TO INDUSTRY STANDARDS, MARKET SALARIES ARE REVIEWED EVERY 3-5	
YEARS BY INDEPENDENT COMPENSATION CONSULTANTS. IYF GRANTS MERIT-BASED	
SALARY INCREASES ON AN ANNUAL BASIS, MERIT IS DETERMINED THROUGH AN ANNUAL	90- OFF 1-1-
PERFORMANCE REVIEW OF EMPLOYEE BY SUPERVISOR. THE SIZE OF THE MERIT POOL IS	- 100
BASED ON ANTICIPATED MARKET SALARY INCREASES AS WELL AS IYF'S FINANCIAL	
CONDITION, TO DETERMINE MARKET SALARY INCREASES 2-3 SALARY SURVEYS FOR	
SIMILAR MARKETS ARE REVIEWED. THE POOL WHICH EXCLUDES THE CEO SALARY IS	
APPROVED BY THE IYF BOARD OF DIRECTORS AND DISTRIBUTED ACROSS THE STAFF BY	
CEO BASED ON MERIT RATINGS. THE AMOUNT OF AN INDIVIDUAL'S SALARY INCREASE	
IS BASED ON MERIT SCORE AND CURRENT SALARY POSITION WITHIN PAY RANGE, THE	
CEO RAISE IS HANDLED DIRECTLY BY THE BOARD. THE CEO PERFORMANCE REVIEW IS	
CONDUCTED BY THE CHAIRMAN OF THE BOARD WHO THEN DETERMINES THE PERCENTAGE	
RAISE GIVEN. SINCE 2005 THE PRACTICE HAS BEEN TO GIVE THE CEO THE AVERAGE	
PERCENTAGE RAISE GIVEN TO THE STAFF.	,
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AL, AK, AR, AZ, CA, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH	- Min-t-market
OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI	
FORM 990 PART VI SECTION C LINE 19: THE AUDITED FINANCIAL STATEMENTS	
132212 01-23-12	Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)		Page 2
Name of the organization INTERNATIONAL YOUTH FOUNDATION		Employer identification number 38-2935397
AND THE 990 TAX FORMS ARE POSTED ON THE ORGANIZATION	'S WEBSITE AND ARE MADE	
AVAILABLE UPON REQUEST. OTHER DOCUMENTS ARE AVAILAB	LE UPON REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:		
NET UNREALIZED LOSSES ON INVESTMENTS:	-485,318.	
FOREIGN CURRENCY GAIN (LOSS)	-124,995.	
TOTAL TO FORM 990, PART XI, LINE 5	-610,313.	
TATELON CO.		
		<u> </u>
		Throughout the state of the sta
¥15 K		
		
	<u> </u>	

Department of the Treasury Internal Revenue Service SCHEDULE R

Name of the organization

Related Organizations and Unrelated Partnerships

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

➤ See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2011 Š entity? Direct controlling Yes × Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) YOUTH FOUNDATION 38-2935397 Direct controlling entity CNTERNATIONAL End-of-year assets status (if section 501(c)(3)) <u>@</u> Public charity 509(A)(3) Total income ਉ Exempt Code section 501(C)(3) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) MARYLAND Primary activity Primary activity REAL ESTATE RENTALS For Paperwork Reduction Act Notice, see the Instructions for Form 990. INTERNATIONAL YOUTH FOUNDATION 52-2085268 Name, address, and EIN Name, address, and EIN of related organization of disregarded entity RESOURCES FOR YOUTH INC -32 SOUTH ST, STE 500 21202 BALTIMORE, MD Part Part II

132161 01-23-12 LHA

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Schedule R (Form 990) 2011 INTERNATIONAL YOUTH FOUNDATION

Page 2

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

Percentage ownership General or Percentage managing ownership Schedule R (Form 990) 2011 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Ξ Yes No 9 Share of end-of-year assets Code V-UBI amount in box '20 of Schedule K-1 (Form 1065) Share of total income ate allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets **©** 9 Direct controlling entity Share of total income ூ Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) <u>©</u> 0 53 Primary activity Direct controlling entity € (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Ē 132162 01-23-12 Part IV

38-2935397

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)	wered "Yes" to Form	990, Part IV, line 34, 35, (35a, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	!				Yes	2
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?	is with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				<u>1</u>		×
b Giff, grant, or capital contribution to related organization(s)				ą		×
				2		*
				7		>
	***************************************			2 .		؛ اه
			***************************************	<u>a</u>		
1 Sale of assets to related organization(s)		***************************************		;		×
				19		×
h Exchange of assets with related organization(s)				두		×
i Lease of facilities, equipment, or other assets to related organization(s)				;=		×
				; ~	×	
 K Performance of services or membership or fundraising solicitations for related organization(s) 	anization(s)			÷	7	×
Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)	***************************************	***************************************	=	7	×
_	ion(s)			Ē		×
n Sharing of paid employees with related organization(s)		***************************************		ŧ		×
			***************************************	9	7	×
p Reimbursement paid by related organization(s) for expenses				5		×
Other transfer of cash or property to related organization(s)				19		×
				÷	_	×
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	who must complete th	is line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1) RESOURCES FOR YOUTH INC	ט	509 884	NA.			
(2)						
(8)						
			10.0			
(4)						
(5)						
(9)						
132163 01-23-12	54		Schedule R (Form 990) 2011	R (Form	990) 20	1 =

-2935397

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

(h) (l) (l) (k) (k) (k) (l) (k) (k) (k) (k) (k) (k) (k) (k) (k) (k				
Share of Disproport Code V. Plantations of School assets Yes No (form 1)				
(f) Share of total income				
(d) Are all Predominant income partners sec. (related, unrelated, original excluded from tax under section 512-514) Yes No				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) (b) (c) (d) Name, address, and EIN Primary activity (relate of unrelated, of entity (related from tax country) under section 512-514)				

Schedule R (Form 990) 2011

Schedule R	(Form 990) 2011	INTERNATIONAL YOUTH FOUNDATION	38-2935397	Page 5
Part VII	(Form 990) 2011 Supplemental Info	rmation		
		ovide additional information for responses to questions on Schedule R (se	e instructions).	
		· ·		
		V-7		
		** \$\psi_{\psi_1} \psi_2 ***********************************		
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Form **8868**

(Rev. January 2012)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

ization Return OMB No. 1545-1709

asury
File a separate application for each return.

 If you: Do not a Electron required of time to Personal visit www 	are filing for an Automatic 3-Month Extension, completer filing for an Additional (Not Automatic) 3-Month Extension, complete Part II unless you have already been granted in the file of the form 8868 if you file form 990-T), or an additional (not automatic) 3-moothile file form 990-T), or an additional (not automatic) 3-moothile any of the forms listed in Part I or Part II with the extension of the forms, which must be sent to the IRS in papalars, govietile and click on e-file for Charities & Nonprofits.	tension, of an automa you need a nth extens ception of per format	complete only Part II (on page 2 of atic 3-month extension on a previous a 3-month automatic extension of tir sion of time. You can electronically for Form 8870, Information Return for (see instructions). For more details of the complete	this form) sly filed Form 8 ile Form 8 Transfers on the ele	orm 8868. 6 months for a corp 868 to request an e Associated With Ce	oration extension ertain	
Part I	Automatic 3-Month Extension of Time	only s	submit original (no copies ne	eded).			
-	ation required to file Form 990-T and requesting an autor			,			
	y corporations (including 1120-C filers), partnerships, REM ome tax returns.					. [
Type or	Name of exempt organization or other filer, see instru	ctions.	- 	Employe	r identification num	ber (EIN) or	
print	INTERNATIONAL YOUTH FOUNDAY	ток		X 38-2935397			
File by the due date for	Number, street, and room or suite no. If a P.O. box, s		tions		Social security number (SSN)		
filing your	32 SOUTH STREET, NO. 500	00 #100 00			outed training (00)	''	
return, See instructions,		oreign add	ress, see instructions.				
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)		•••••••••••••••••••••••••••••••••••••••	01	
Applicati	on	Return	Application			Return	
ls For		Code	Is For			Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990	-BL	02	Form 1041-A	41-A			
Form 990	·EZ	01	Form 4720		09		
Form 990		04	Form 5227	10			
	·T (sec. 401(a) or 408(a) trust)	05	Form 6069	11			
Form 990	-T (trust other than above)	06	Form 8870			12	
	SAMANTHA BARBER poks are in the care of \triangleright 32 SOUTH STREET none No. \triangleright 410-951-1500		. 500 - BALTIMORE,	MD 2	1202		
 If the c 	organization does not have an office or place of business is for a Group Return, enter the organization's four digit of . If it is for part of the group, check this box	Group Exe	ited States, check this box mption Number (GEN) [f this is fo	r the whole group, a		
is fo	quest an automatic 3-month (6 months for a corporation $AUGUST\ 15$, 2012 , to file the exemptor the organization's return for: X calendar year 2011 or 1000 tax year beginning	t organizat	tion return for the organization name		The extension		
	ne tax year entered in line 1 is for less than 12 ποπths, cl			Final retur	n		
					n		
nonrefundable credits, See instructions.			ny refundable gradite and			0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundation estimated tax payments made. Include any prior year overpayment allowed as a second control of the control of th				3b	\$	0.	
					<u> </u>		
					0.		
	If you are going to make an electronic fund withdrawal w						
	or Privacy Act and Paperwork Reduction Act Notice,				Form 8868 (R		

123841 01-04-12 Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

OWID	NO.	1343-	1010

Department of the Treasury Internal Revenue Service

For calendar year 2011, or fiscal year beginning ___, 2011, and ending __

Do not send to the IRS. Keep for your records.

See Instructions.

name of exempt organization	Employer	dentification number
INTERNATIONAL YOUTH FOUNDATION	38~2	935397
Name and title of officer		
WILLIAM S. REESE		
PRESIDENT/CEO		
Part 1 Type of Return and Return Information (Whole Dollars Only)		
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the application 1 line in Part I.	k, then leave l	ine 1b, 2b, 3b, 4b, or 5b,
1a Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	28458446
2a Form 990-EZ check here D total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)		
5a Form 8868 check here ▶	5b	· · · · · ·
Part II Declaration and Signature Authorization of Officer		
Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a co	ny of the oras	inizationie 2011
intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in protite date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate a debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries a payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic organization's consent to electronic funds withdrawal. Officer's PIN: check one box only	cessing the re n electronic fu ization's fede S. Treasury F al institutions i and resolve iss	eturn or refund, and (o) unds withdrawal (direct ral taxes owed on this inancial Agent at involved in the sues related to the applicable, the
ERO firm name	. to entor my	Enter five numbers, bu
		do not enter all zeros
as my signature on the organization's tax year 2011 electronically filed return. If I have indicated within is being filed with a state agency(les) regulating charities as part of the IRS Fed/State program, I also a enter my PIN on the return's disclosure consent screen.	uthorize the a	forementioned ERO to
X As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 201 indicated within this return that a copy of the return is being filed with a state agency(les) regulating ch program, I will enter my PIN on the return's disclosure consent screen.		
Officer's signature ▶ Date ▶	6125	112
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit electronic filing identification		
number (EFIN) followed by your five-digit self-selected PIN. 2702192081 do not enter all zeros		
I certify that the above numeric entry is my PIN, which is my signature on the 2011 electronically filed return for the confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (Mee-file Providers for Business Returns.		
ERO's signature ► 1 ## Date ► 6	6/15h	/ ઝ
ERO Must Retain This Form - See Instructions	- 0-	_

Do Not Submit This Form To the IRS Unless Requested To Do So

Form 8879-EO (2011)