

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning

and ending

B Check if applicable:

- ☒ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

INTERNATIONAL YOUTH FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

1 EAST PRATT STREET

701

City or town, state or province, country, and ZIP or foreign postal code

BALTIMORE, MD 21202

F Name and address of principal officer: WILLIAM S. REESE

SAME AS C ABOVE

D Employer identification number

38-2935397

E Telephone number

410-951-1500

G Gross receipts \$ 29,068,232.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.IYFNET.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1990

M State of legal domicile: IL

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: A GLOBAL NGO PREPARING YOUNG PEOPLE TO BE HEALTHY PRODUCTIVE AND ENGAGED CITIZENS.			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	13	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12	
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	83	
	6	Total number of volunteers (estimate if necessary)	6	12	
		7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b		Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	12,332,807.	20,921,121.	
	9	Program service revenue (Part VIII, line 2g)	1,089,808.	1,801,119.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	375,340.	998,400.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	46,296.	5,197.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,844,251.	23,725,837.	
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,613,865.	4,426,711.
		14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,819,798.	10,024,076.
		16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
		16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 726,663.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,211,407.	4,892,541.	
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	27,645,070.	19,343,328.	
19		Revenue less expenses. Subtract line 18 from line 12	-13,800,819.	4,382,509.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	33,405,411.	36,808,851.	
	21	Total liabilities (Part X, line 26)	2,085,349.	1,937,439.	
	22	Net assets or fund balances. Subtract line 21 from line 20	31,320,062.	34,871,412.	

Part II Signature Block

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

Sign Here	Signature of officer	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SAMANTHA BARBEE, CHIEF FINANCIAL OFFICER Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	8/12/16	P00369217
	Firm's name ▶ RSM US LLP	Firm's EIN ▶ 42-0714325	Phone no. (301) 296-3600	

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☒ 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 ☒ No

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

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 4,312,654. including grants of \$ 916,491.) (Revenue \$ 1,054,983.)**INITIATIVES IN THE MIDDLE EAST AND NORTH AFRICA:**

WE WORK WITH YOUTH IN SEVEN COUNTRIES IN NORTH AFRICA AND THE MIDDLE
EAST TO STRENGTHEN EMPLOYABILITY, CAREER GUIDANCE, AND SOCIAL
ENTREPRENEURSHIP. EGYPT@WORK TRAINED OVER 12,600 YOUTH--SURPASSING THE
ORIGINAL GOAL OF 10,000--AND 78 PERCENT OF GRADUATES SECURED EMPLOYMENT
OR STARTED A BUSINESS. EMPOLI HABILITE CONNECTS YOUTH IN MOROCCO WITH
IN-DEMAND TECHNICAL AND LIFE SKILLS TRAINING IN THE TOURISM,
TRANSPORTATION, AND LOGISTICS SECTORS. FOUM EL OUED IS IYF'S FIRST
INITIATIVE IN SOUTHERN MOROCCO THAT IS REINFORCING THE TECHNICAL AND
ORGANIZATIONAL STRENGTH OF THE AREA'S MAIN AGRICULTURAL COOPERATIVE.
IDMAJ IS A THREE-YEAR INITIATIVE TO EXPAND OPPORTUNITIES FOR ALGERIA
YOUTH IN EMPLOYMENT, ENTREPRENEURSHIP, AND CIVIC ENGAGEMENT. YOUTH

4b (Code:) (Expenses \$ 3,440,773. including grants of \$ 975,534.) (Revenue \$ 2,600.)**INITIATIVES IN SUB-SAHARAN AFRICA:**

SINCE IYF'S FOUNDING IN 1990, WE'VE HELPED MORE THAN TWO MILLION
SUB-SAHARAN AFRICAN YOUTH TURN THEIR TALENT AND ENTHUSIASM INTO JOBS
AND CAREERS IN GROWTH SECTORS SUCH AS SERVICE INDUSTRIES, AGRICULTURE,
AND CONSTRUCTION. ZIMBABWE:WORKS HAS BROUGHT US INTO PARTNERSHIP WITH
LOCAL NGOS AND COMPANIES TO PROVIDE CRITICAL JOB READINESS TRAINING TO
YOUNG PEOPLE AND BUSINESS COURSEWORK AND ACCESS TO MICROFINANCE LOANS
FOR YOUNG ENTREPRENEURS. YOUTHMAP WAS A SEVEN-COUNTRY INITIATIVE
INFORMING HOW DONORS, INTERNATIONAL AND LOCAL NGOS, AND GOVERNMENTS
UNDERSTAND AND ADDRESS THE CHALLENGES AFRICA'S YOUNG PEOPLE ARE
CONFRONTING. TANZANIA YOUTH SCHOLARS WAS A FIVE-YEAR INITIATIVE THAT
CONNECTED ORPHANS AND VULNERABLE CHILDREN IN TANZANIA WITH EDUCATIONAL

4c (Code:) (Expenses \$ 1,534,323. including grants of \$ 587,623.) (Revenue \$ 20,000.)**INITIATIVES IN LATIN AMERICA AND THE CARIBBEAN:**

WE'VE WORKED WITH MORE THAN 70 LOCAL ORGANIZATIONS IN LATIN AMERICA AND
THE CARIBBEAN TO HELP THEM HARNESS THEIR PASSION FOR SUSTAINABLE YOUTH
DEVELOPMENT PROJECTS THAT MEASURABLY CHANGE THE LIVES OF UNDERSERVED
YOUTH. BUILDING ON THE YOUTH:WORK MEXICO MODEL, ORALE IS ADDRESSING THE
SPECIFIC NEEDS OF 16 TO 28-YEAR-OLDS WHO ARE NOT IN EMPLOYMENT,
EDUCATION, OR TRAINING (NEET) IN THE CITIES OF TIJUANA, LEON, AND
GUADALAJARA, MEXICO. RUTAS IS AN INITIATIVE IN NUEVO LEON AND CHIHUAHUA
THAT IS HELPING REFORM THE TECHNICAL UPPER SECONDARY EDUCATION SYSTEM
TO BE MORE IN LINE WITH THE NEEDS OF EMPLOYERS IN KEY GROWTH SECTORS,
SUCH AS THE AEROSPACE INDUSTRY.

4d Other program services (Describe in Schedule O.)(Expenses \$ 6,681,645. including grants of \$ 1,947,062.) (Revenue \$ 723,536.)**4e** Total program service expenses 15,969,395.Form **990** (2015)

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)? <i>If "Yes," complete Schedule A</i>	1 x	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	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? <i>If "Yes," complete Schedule C, Part I</i>	3	x
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	x
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	x
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	x
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	x
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	x
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	x
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 x	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a x	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	x
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	x
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	x
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f x	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	x
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b x	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	x
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a x	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b x	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 x	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16 x	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	x
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	x
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	x

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☒

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 35	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (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 83	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b x	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a x	
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	x
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a x	
b If "Yes," enter the name of the foreign country: SEE SCHEDULE O See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	x
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	x
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	x
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	x
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	x
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	x
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	x
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8 N/A	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a N/A	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b N/A	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a N/A	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a N/A	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b N/A	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a N/A	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	x
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

Check if Schedule O contains a response or note to any line in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 12		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9		X

Section 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		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c 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? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► CA, IL, MD, NY, SC, VA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►
SAMANTHA BARBEE - 410-951-1500
1 EAST PRATT STREET, SUITE 701, BALTIMORE, MD 21202

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DOUGLAS BECKER CHAIRMAN	0,20 0,10	X		X				0.	0.	0.
(2) ABDULAZIZ F. AL-KHAYYAL DIRECTOR	0,20	X						0.	0.	0.
(3) KHALIDA BROHI DIRECTOR	0,20	X						0.	0.	0.
(4) OLIVIER FLEUROT DIRECTOR	0,20	X						0.	0.	0.
(5) EMMANUEL JIMENEZ DIRECTOR	0,20	X						0.	0.	0.
(6) EVELYN BERG IOSCHPE DIRECTOR	0,20	X						0.	0.	0.
(7) RICK LITTLE DIRECTOR	0,20	X						0.	0.	0.
(8) JOSEPH MATALON DIRECTOR	0,20 0,10	X						0.	0.	0.
(9) PEGGY MATIVO DIRECTOR	0,20	X						0.	0.	0.
(10) CHRIS NASSETTA DIRECTOR	0,20 0,10	X						0.	0.	0.
(11) PETER WOICKE DIRECTOR	0,20	X						0.	0.	0.
(12) CONNIE WONG DIRECTOR	0,20 0,10	X						0.	0.	0.
(13) WILLIAM REESE PRESIDENT/CEO	39,90 0,10	X		X				320,331.	0.	40,608.
(14) SAMANTHA BARBEE CHIEF FINANCIAL OFFICER	39,90 0,10			X				194,837.	0.	25,363.
(15) PETER SHIRAS EXECUTIVE VP, BUSINESS DEVELOPMENT	40,00				X			222,132.	0.	27,875.
(16) AWAIS SUFI EXECUTIVE VP, PROGRAMS	40,00				X			171,069.	0.	35,165.
(17) SUSAN PEZZULLO DIRECTOR, LATIN AMERICA & CARIBBEAN	40,00				X			157,822.	0.	38,920.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JIM PEIRCE VP, STRATEGIC PLANNING & OUTREACH	40.00					X		140,889.	0.	18,726.
(19) ASAKO FRANKLIN DIRECTOR, HUMAN RESOURCES	40.00					X		136,423.	0.	7,288.
1b Sub-total								1,343,503.	0.	193,945.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,343,503.	0.	193,945.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **14**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3**
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4**
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5**

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 4,680.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d 659,669.				
	e Government grants (contributions)	1e 5,239,976.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 15,016,796.				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		20,921,121.			
	Program Service Revenue	Business Code				
2 a CONTRACT REVENUE		900099	1,593,511.	1,593,511.		
b LICENSING FEE		900099	176,800.	176,800.		
c WORKSHOP FEES		900099	21,500.	21,500.		
d CERTIFICATION FEE		900099	9,300.	9,300.		
e PUBLICATION SALES		900099	8.	8.		
f All other program service revenue						
g Total. Add lines 2a-2f			1,801,119.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		207,000.			207,000.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)		791,400.			791,400.
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a OTHER INCOME	900099	5,197.			5,197.	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		5,197.				
12 Total revenue. See instructions.		23,725,837.	1,801,119.	0.	1,003,597.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	4,426,711.	4,426,711.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	581,139.	46,922.	534,217.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,361,085.	6,206,655.	726,595.	427,835.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	440,084.	348,834.	57,006.	34,244.
9 Other employee benefits	1,242,085.	1,029,234.	150,862.	61,989.
10 Payroll taxes	399,683.	291,987.	79,285.	28,411.
11 Fees for services (non-employees):				
a Management				
b Legal	106,014.	34,129.	71,885.	
c Accounting	115,444.	43,175.	72,269.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	35,422.		35,422.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,633,445.	1,426,596.	199,719.	7,130.
12 Advertising and promotion				
13 Office expenses	562,431.	389,029.	168,301.	5,101.
14 Information technology	115,628.	31,206.	84,422.	
15 Royalties				
16 Occupancy	493,422.	258,954.	234,468.	
17 Travel	1,214,971.	1,004,392.	57,743.	152,836.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	339,975.	306,976.	25,989.	7,010.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	25,171.		25,171.	
23 Insurance	47,691.	7,196.	40,495.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIP DUES	66,959.	4,009.	62,596.	354.
b BAD DEBT	60,562.	60,545.	17.	
c OTHER EXPENSES	50,732.	28,171.	20,808.	1,753.
d PGM-VEHICLES	24,674.	24,674.		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	19,343,328.	15,969,395.	2,647,270.	726,663.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	559.	1	271.
	2 Savings and temporary cash investments	8,334,212.	2	13,913,609.
	3 Pledges and grants receivable, net	13,906,420.	3	11,027,312.
	4 Accounts receivable, net	18,500.	4	1,165,633.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	453,219.	9	182,852.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 453,601.		
	b Less: accumulated depreciation	10b 317,765.	93,238.	10c 135,836.
	11 Investments - publicly traded securities	9,753,525.	11	10,121,106.
	12 Investments - other securities. See Part IV, line 11	209,406.	12	115,744.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	636,332.	15	146,488.
16 Total assets. Add lines 1 through 15 (must equal line 34)	33,405,411.	16	36,808,851.	
Liabilities	17 Accounts payable and accrued expenses	1,846,105.	17	1,234,530.
	18 Grants payable	163,863.	18	138,034.
	19 Deferred revenue	75,381.	19	564,875.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25	2,085,349.	26	1,937,439.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	11,702,909.	27	11,319,636.
	28 Temporarily restricted net assets	18,435,119.	28	22,168,742.
	29 Permanently restricted net assets	1,182,034.	29	1,383,034.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	31,320,062.	33	34,871,412.
34 Total liabilities and net assets/fund balances	33,405,411.	34	36,808,851.	

Form 990 (2015)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,725,837.
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,343,328.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,382,509.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	31,320,062.
5	Net unrealized gains (losses) on investments	5	-835,450.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	4,291.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	34,871,412.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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

	Yes	No
2a		x
2b	x	
2c	x	
3a	x	
3b	x	

Form **990** (2015)

Department of the Treasury
Internal Revenue Service

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

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

2015

Open to Public Inspection

Employer identification number

INTERNATIONAL YOUTH FOUNDATION

38-2935397

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

g. Provide the following information about the supported organization(s):						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Schedule A (Form 990 or 990-EZ) 2015

Form 990 or 990-EZ. 532021 09-23-15

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	26,942,235.	42,287,468.	23,057,260.	12,332,807.	20,496,294.	125,116,064.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	26,942,235.	42,287,468.	23,057,260.	12,332,807.	20,496,294.	125,116,064.
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)						25,826,038.
6 Public support. Subtract line 5 from line 4.						99,290,026.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	26,942,235.	42,287,468.	23,057,260.	12,332,807.	20,496,294.	125,116,064.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	199,079.	198,972.	210,059.	191,784.	207,000.	1,006,894.
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 VI.)	572,207.	15,535.	9,599.	46,296.	5,197.	648,834.
11 Total support. Add lines 7 through 10						126,771,792.
12 Gross receipts from related activities, etc. (see instructions)					12	4,543,371.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	78.32 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	85.77 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2015

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2015 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)		
3	Excess distributions carryover, if any, to 2015:		
a			
b			
c			
d	From 2013		
e	From 2014		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2015 distributable amount		
i	Carryover from 2010 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2015 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2015 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4.		
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).		
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).		
7	Excess distributions carryover to 2016. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a			
b			
c	Excess from 2013		
d	Excess from 2014		
e	Excess from 2015		

Schedule A (Form 990 or 990-EZ) 2015

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**SPONSORSHIP INCOME**

2011 AMOUNT: \$ 572,207.

2012 AMOUNT: \$ 15,535.

2013 AMOUNT: \$ 9,599.

2014 AMOUNT: \$ 46,296.

2015 AMOUNT: \$ 5,197.

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

OMB No. 1545-0047

2015

Name of the organization

Employer identification number

INTERNATIONAL YOUTH FOUNDATION

38-2935397

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 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 foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules**☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

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INTERNATIONAL YOUTH FOUNDATION

38-2935397

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 1,130,441.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 3,688,910.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 4,487,465.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,810,808.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 4,987,279.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 1,002,845.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization INTERNATIONAL YOUTH FOUNDATION	Employer identification number 38-2935397
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 444,986.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 598,947.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 659,669.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

38-2935397

(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
	 	\$ _____	_____
(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 organization

Employer identification number

INTERNATIONAL YOUTH FOUNDATION

38-2935397

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		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" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a 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 historic structure listed in the National Register	2d

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

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

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

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,409,160.	4,223,621.	3,341,684.	3,011,950.	2,938,446.
b Contributions	201,000.	33,700.	183,000.	1,128.	132,244.
c Net investment earnings, gains, and losses	-73,039.	151,839.	698,937.	328,606.	-58,740.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	4,537,121.	4,409,160.	4,223,621.	3,341,684.	3,011,950.

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

a Board designated or quasi-endowment ☒ 63.19 %

b Permanent endowment ☒ 30.48 %

c Temporarily restricted endowment ☒ 6.33 %

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

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		453,601.	317,765.	135,836.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				135,836.

Schedule D (Form 990) 2015

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Schedule D (Form 990) 2015

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	23,146,660.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-835,450.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	291,695.
e	Add lines 2a through 2d	2e	-543,755.
3	Subtract line 2e from line 1	3	23,690,415.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,422.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	35,422.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	23,725,837.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	19,820,614.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	512,708.
e	Add lines 2a through 2d	2e	512,708.
3	Subtract line 2e from line 1	3	19,307,906.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,422.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	35,422.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	19,343,328.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE IYF ENDOWMENT IS A COMBINATION OF BOARD DESIGNATED FUNDS AS WELL AS

PERMANENTLY RESTRICTED DONOR CONTRIBUTIONS WHICH WILL BE INVESTED IN

PERPETUITY. THE INCOME OF THE ENDOWMENT WILL BE RELEASED FOR USE TO

SUPPORT THE OPERATIONAL NEEDS OF THE ORGANIZATION.

PART X, LINE 2:

INTERNATIONAL YOUTH FOUNDATION AND RFY ARE EXEMPT FROM FEDERAL INCOME

TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC).

ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE

ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. INTERNATIONAL YOUTH

FOUNDATION AND RFY ARE NOT CONSIDERED PRIVATE FOUNDATIONS.

Part XIII Supplemental Information (continued)

IYF RECOGNIZES THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT 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% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT.

MANAGEMENT EVALUATED IYF'S TAX POSITIONS AND CONCLUDED THAT THE ENTITY HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. THE RETURNS ARE SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES GENERALLY THREE AND FOUR YEARS, RESPECTIVELY, AFTER THEY ARE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CONSOLIDATED ENTITY ACTIVITIES	287,402.
GAIN OR (LOSS) FOREIGN CURRENCY	4,293.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	291,695.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CONSOLIDATED ENTITY ACTIVITIES	512,708.
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SCHEDULE F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

Employer identification number

INTERNATIONAL YOUTH FOUNDATION

38-2935397

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
MIDDLE EAST AND NORTH AFRICA	3	39	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	2,272,018.
RUSSIA AND NEIGHBORING STATES	2	10	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	139,769.
NORTH AMERICA	1	9	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	532,580.
SUB-SAHARAN AFRICA	3	22	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	1,096,134.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS		25,000.
EAST ASIA AND THE PACIFIC	0	0	GRANTS		396,294.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS		39,541.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS		1,067,699.
3 a Sub-total	9	80			5,569,035.
b Total from continuation sheets to Part I	0	0			2,898,177.
c Totals (add lines 3a and 3b)	9	80			8,467,212.

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

Schedule F (Form 990) 2015

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(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	0	0	GRANTS		725,069.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTS		106,150.
SOUTH AMERICA	0	0	GRANTS		901,251.
SOUTH ASIA	0	0	GRANTS		168,898.
SUB-SAHARAN AFRICA	0	0	GRANTS		996,809.
Totals					2,898,177.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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	43,202	WIRE TRANSFER	0		
			EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	135,556	WIRE TRANSFER	0		
			EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	162,036	WIRE TRANSFER	0		
			EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	55,500	WIRE TRANSFER	0		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	16,452	WIRE TRANSFER	0		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	442,627	WIRE TRANSFER	0		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	23,519	WIRE TRANSFER	0		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	10,116	WIRE TRANSFER	0		

2 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 45

3 Enter total number of other organizations or entities 1

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), 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 EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	14,125.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	15,249.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	11,585.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	99,000.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	80,400.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	163,418.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	40,000.	WIRE TRANSFER	0.		
			NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	126,405.	WIRE TRANSFER	0.		
			NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	281,245.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), 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	10,531.	WIRE TRANSFER	0.		
			NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	131,368.	WIRE TRANSFER	0.		
			NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	71,302.	WIRE TRANSFER	0.		
			NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	100,718.	WIRE TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	YOUTH DEVELOPMENT PROGRAMS	68,606.	WIRE TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	YOUTH DEVELOPMENT PROGRAMS	29,870.	WIRE TRANSFER	0.		
			SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	439,306.	WIRE TRANSFER	0.		
			SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	107,512.	WIRE TRANSFER	0.		
			SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	58,264.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), 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	YOUTH DEVELOPMENT PROGRAMS	215,102.	WIRE TRANSFER	0.		
			SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	30,967.	WIRE TRANSFER	0.		
			SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	146,104.	WIRE TRANSFER	0.		
			SOUTH ASIA	YOUTH DEVELOPMENT PROGRAMS	22,794.	WIRE TRANSFER	0.		
			SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	111,424.	WIRE TRANSFER	0.		
			SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	235,993.	WIRE TRANSFER	0.		
			SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	42,217.	WIRE TRANSFER	0.		
			SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	20,947.	WIRE TRANSFER	0.		
			SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	45,482.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), 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	60,446	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	65,693	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	14,861	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	90,303	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	88,485	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	76,848	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	31,082	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	21,274	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	32,244	WIRE TRANSFER	0		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
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	CENTRAL AMERICA AND THE CARIBBEAN	10	25,000	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	EUROPE (INCLUDING ICELAND & GREENLAND)	13	39,541	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	MIDDLE EAST AND NORTH AFRICA	5	151,208	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	NORTH AMERICA	1	3,500	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	SOUTH AMERICA	10	50,101	WIRE TRANSFER	0.		

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) ☒ Yes ☐ No

Schedule F (Form 990) 2015

Part V Supplemental Information

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.

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

Part V Supplemental Information

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.

DISBURSED FOR THE REMAINDER OF THE GRANT ARE DETERMINED BY A SCHEDULE

LAI D OUT IN THE GRANT AGREEMENT. IN ORDER FOR FUNDS TO BE DISBURSED, ALL

PROGRAM AND FINANCIAL DELIVERABLES MUST BE MET.

BEYOND REGULAR PROGRAM REPORTS, IYF RELIES ON REGULAR COMMUNICATION WITH

GRANTEES TO ENSURE SUCCESS OF PROGRAMS. THIS COMMUNICATION TAKES THE

FORM OF ELECTRONIC COMMUNICATIONS AS WELL AS REGULAR SITE VISITS DURING

WHICH PROGRAM PROGRESS IS ASSESSED AND MEASURED.

FINANCIAL REPORTS ARE COLLECTED ON A REGULAR BASIS (AS DETAILED ABOVE)

AND PROGRESS AGAINST BUDGET IS ASSESSED. FINANCIAL REPORTS ARE REVIEWED

FOR BOTH DONOR COMPLIANCE AND PROGRAM DELIVERY.

UPON COMPLETION OF THE PROJECT, GRANTEES SUBMIT FINAL REPORTS ALONG WITH

COPIES OF ALL MATERIALS DEVELOPED.

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" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

Part I Questions Regarding Compensation

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

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

b If any of the boxes 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

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

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

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

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

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

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

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

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

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

8 Were any amounts reported on 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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

x

x

x

x

x

x

x

x

x

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

Schedule J (Form 990) 2015

Part III Supplemental Information

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

PART I, LINE 4A:

ASAKO FRANKLIN RECEIVED \$107,377 IN SEVERANCE.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ENTREPRENEURSHIP DEVELOPMENT (YED) IN PALESTINE OFFERS THREE INTEGRATED

COMPONENTS TO ENHANCE OPPORTUNITIES FOR YOUTH AGES 14 TO 29: CAPACITY

BUILDING TO YOUTH-SERVING INSTITUTIONS, SUPPORT FOR EMPLOYMENT AND

ENTREPRENEURSHIP EDUCATION, AND PRACTICAL ON-THE-JOB TRAINING, THROUGH

THE SAUDI YOUTH@WORK ALLIANCE WE ARE BUILDING THE CAPACITY FOR SAUDI

NONPROFITS TO OFFER WORKFORCE DEVELOPMENT PROGRAMS IN EMPLOYABILITY,

ENTREPRENEURSHIP, AND SERVICE LEARNING, AND WE'RE PROVIDING GRANTS AND

TECHNICAL SUPPORT TO A SECTION OF THESE ORGANIZATIONS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

SCHOLARSHIPS AND TRAINING TO HELP THEM REACH THEIR FULL POTENTIAL.

PREPARA O LABORAL PARA JOVENS (PREPA) PREPARED 2,000 OF MOZAMBIQUE'S

HARDEST TO REACH AND MOST VULNERABLE YOUTH WITH THE SKILLS TO ACCESS

JOB, BECOME SUCCESSFUL ENTREPRENEURS, AND AVOID UNHEALTHY BEHAVIORS.

UNDERSTANDING THE VALUE OF SELF-EMPLOYMENT FOR THE REGION'S YOUTH, WE

ALSO PROVIDE ENTREPRENEURSHIP TRAINING THROUGH BUILD YOUR BUSINESS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

GLOBAL INITIATIVES:

THE INTERNATIONAL YOUTH FOUNDATION HAS THREE MAJOR GLOBAL INITIATIVES

THAT SEEK TO ENHANCE YOUTH EMPLOYABILITY, PASSPORT TO SUCCESS RESPONDS

TO THE NEEDS OF YOUTH, EMPLOYERS, YOUTH-SERVING ORGANIZATIONS, AND

OTHER KEY STAKEHOLDERS BY PROVIDING LIFE SKILLS TO YOUNG JOBSEEKERS.

THE CURRICULUM HAS BEEN TRANSLATED INTO TWENTY LANGUAGES AND

IMPLEMENTED IN MORE THAN 40 COUNTRIES. IN PARTNERSHIP WITH THE

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

Schedule O (Form 990 or 990-EZ) (2015)

532211
09-02-15

Name of the organization

Employer identification number

INTERNATIONAL YOUTH FOUNDATION

38-2935397

CATERPILLAR FOUNDATION, EQUIPYOUTH PREPARES YOUNG PEOPLE IN SEVEN COUNTRIES WITH MARKET-RELEVANT LIFE AND TECHNICAL SKILLS TRAINING, INTERNSHIPS, ON-THE-JOB LEARNING, AND JOB PLACEMENT SUPPORT AND SERVICES. THE HILTON WORLDWIDE PARTNERSHIP OFFERS LIFE-SKILLS TRAINING TO YOUNG PEOPLE ACROSS FIFTEEN COUNTRIES ON FOUR CONTINENTS. GLOBALLY, IYF'S BOARD OF DIRECTORS AUTHORIZED INVESTMENTS IN A VARIETY OF INITIATIVES TO EXPAND OUR IMPACT, AS WELL AS TO ENHANCE OUR CAPACITY IN THE AREA OF NEW PROGRAM DESIGN AND PARTNERSHIP DEVELOPMENT. INCLUDED IN THESE SPECIAL INITIATIVES WAS THE COMPLETION OF STUDIES TO IDENTIFY THE MARKET POTENTIAL FOR IYF PRODUCTS AND SERVICES, INCLUDING A WORK-READINESS ASSESSMENT.

EXPENSES \$ 1,836,071. INCLUDING GRANTS OF \$ 53,835. REVENUE \$ 373,698.

YOUTHACTIONNET:

YOUTHACTIONNET WORKS TO STRENGTHEN AND EXPAND THE IMPACT OF YOUTH-LED SOCIAL VENTURES AROUND THE GLOBE. OVER 15 YEARS, IT HAS CREATED ONE OF THE WORLD'S LARGEST NETWORKS OF YOUNG SOCIAL ENTREPRENEURS COMPRISING MORE THAN 1,350 YOUNG LEADERS IN 90 COUNTRIES. TO IDENTIFY AND SUPPORT THE EFFORTS OF ACCOMPLISHED YOUNG CHANGE-MAKERS, YOUTHACTIONNET OPERATES GLOBAL AND LOCAL FELLOWSHIP PROGRAMS. AT THE GLOBAL LEVEL, 20 YOUNG FOUNDERS/CEOS ARE SELECTED ANNUALLY AS LAUREATE GLOBAL FELLOWS. EACH BENEFITS FROM ADVANCED LEADERSHIP TRAINING, COACHING/MENTORING, ADVOCACY, FUNDING, AND NETWORKING OPPORTUNITIES. AT THE LOCAL LEVEL, YOUTHACTIONNET MAINTAINS A NETWORK OF NATIONAL/REGIONAL YOUTH LEADERSHIP INSTITUTES THAT PROVIDE SIMILAR SUPPORTS AND SERVICES TO EMERGING LEADERS, WHILE DEVELOPING THE YOUTH LEADERSHIP SECTOR IN THEIR RESPECTIVE COUNTRIES. BADIR IS A PART OF THE YOUTHACTIONNET GLOBAL NETWORK AND DESIGNED TO EQUIP YOUTH IN JORDAN WITH THE KNOWLEDGE AND

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

SKILLS THEY NEED TO STRENGTHEN AND SCALE UP THEIR SOCIAL CHANGE.

EXPENSES \$ 1,370,160. INCLUDING GRANTS OF \$ 290,623. REVENUE \$ 52,542.

NEW EMPLOYMENT OPPORTUNITIES FOR YOUTH (NEO) IN LATIN AMERICA:

THIS MULTI-STAKEHOLDER INITIATIVE AIMS TO CLOSE THE GAP BETWEEN YOUTH

SKILLS AND EMPLOYER DEMAND FOR A QUALIFIED WORKFORCE IN LATIN AMERICA

AND THE CARIBBEAN, LAUNCHED IN 2012 AT THE SUMMIT OF THE AMERICAS, NEO

IS PROVIDING HIGH-IMPACT, MARKET-RELEVANT TRAINING AND SERVICES TO

DISADVANTAGED YOUTH AGES 16 TO 29 AND MOBILIZING THE SUPPORT OF AT

LEAST 1,000 COMPANIES, BRINGING TOGETHER STAKEHOLDERS FROM THE PUBLIC,

PRIVATE, AND CIVIL SECTORS, NEO SUPPORTS THE FORMATION AND GROWTH OF

ALLIANCES IN 12 COUNTRIES WITH FINANCIAL RESOURCES, TECHNICAL SUPPORT,

AND CAPACITY STRENGTHENING SERVICES.

EXPENSES \$ 1,297,884. INCLUDING GRANTS OF \$ 330,690. REVENUE \$ 295,296.

INITIATIVES IN EURASIA:

WE EMPOWER YOUNG PEOPLE IN EURASIA WITH THE INFORMATION, SKILLS, AND

MENTORING TO SUCCEED AS EMPLOYEES AND AS ENTREPRENEURS. JASA.KG WAS A

FOUR-YEAR CIVIC AND ENTREPRENEURSHIP INITIATIVE IN THE KYRGYZ REPUBLIC

THAT FOCUSED ON FOUR KEY AREAS: CIVIC ENGAGEMENT, WORKFORCE

DEVELOPMENT, POSITIVE YOUTH DEVELOPMENT, AND LIFE SKILLS FOR ORPHANS,

BRILLIANT FUTURES HELPS YOUTH AGES 14 TO 18 IN VOCATIONAL SCHOOLS IN

BEIJING AND NANJING LEARN AND PRACTICE MARKETABLE SKILLS, THE ZANGAR

INITIATIVE IS A COMMUNITY-DRIVEN INITIATIVE THAT PREPARES YOUNG MEN AND

WOMEN IN THE ATYRAU REGION OF KAZAKHSTAN TO FIND AND KEEP JOBS. IN

INDIA, WE LED THE YOUNG ENTREPRENEURS INITIATIVE IN SUPPORT OF YOUNG

MEN AND WOMEN 15 TO 29 YEARS OLD IN DELHI AND MUMBAI.

EXPENSES \$ 1,164,868. INCLUDING GRANTS OF \$ 617,507. REVENUE \$ 2,000.

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

WALMART SOCIAL RETAIL TRAINING PROGRAM:

BUILDING ON THE SUCCESS OF AN EARLIER INITIATIVE EQUIPPING AT-RISK

YOUTH IN BRAZIL WITH RETAIL, IT, AND LIFE SKILLS, WE JOINED WITH

WALMART FOUNDATION TO LAUNCH THE WALMART SOCIAL RETAIL TRAINING PROGRAM

IN 2012, THIS GLOBAL INITIATIVE HAS OVERSEEN THE TRANSLATION OF THE

PROVEN ESCOLA SOCIAL DO VAREJO CURRICULUM FROM PORTUGUESE INTO CHINESE,

ENGLISH, AND SPANISH. NOW WITH PILOT ADAPTATIONS IN ARGENTINA, CHILE,

MEXICO, AND SOUTH AFRICA, WE'RE STUDYING HOW TO REACH EVEN MORE YOUTH.

THROUGH THE NEXT PHASE OF THE PROGRAM IN ARGENTINA AND CHILE, WE'RE

TRAINING MORE THAN 250 STAFF AT OVER 70 YOUTH-SERVING NGOS SO THAT THEY

CAN REACH 18,000 YOUTH THROUGH THE END OF 2016.

EXPENSES \$ 1,012,662, INCLUDING GRANTS OF \$ 654,407. REVENUE \$ 0.

FORM 990, PART V, LINE 3B:

INTERNATIONAL YOUTH FOUNDATION IS AWAITING ADDITIONAL INFORMATION IN ORDER

TO TIMELY FILE A COMPLETE AND ACCURATE FORM 990-T BY THE EXTENDED DEADLINE

OF NOVEMBER 15, 2016.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

JORDAN, TANZANIA, KYRGYZSTAN, ZIMBABWE,

TUNISIA, MOROCCO, MEXICO, KAZAKHSTAN,

OTHER COUNTRY

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

990 REVIEW PROCESS

1. FORMS TO BE COMPLETED BY CONTROLLER, CFO AND TAX ACCOUNTANTS

2. FORMS REVIEWED BY IYF'S ATTORNEYS.

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

3. DRAFT FORMS REVIEWED BY CHAIRMAN OF INVESTMENT AND AUDIT COMMITTEE

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.

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

Name of the organization	Employer identification number
INTERNATIONAL YOUTH FOUNDATION	38-2935397

COMPENSATION CONSULTANTS.

HISTORICALLY, IYF HAS GIVEN ANNUAL MERIT-BASED SALARY INCREASES, MERIT IS

DETERMINED THROUGH AN ANNUAL PERFORMANCE REVIEW OF EMPLOYEE BY SUPERVISOR.

THE SIZE OF THE MERIT POOL IS 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, MORE RECENTLY, IYF HAS OPTED TO GIVE

INFLATIONARY RAISES ONLY, GIVING ALL STAFF AT SIMILAR LEVELS IN THE

ORGANIZATION THE SAME PERCENTAGE RAISE, THESE RAISES WERE DEVELOPED IN A

SIMILAR MANNER AS THE MERIT POOL USING MARKET INFORMATION AND IYF FINANCIAL

POSITION AS THE INFORMING FACTORS, IYF'S BOARD OF DIRECTORS APPROVED THE

RATES AND RAISES WERE NOT GRANTED UNTIL PERFORMANCE REVIEWS WERE

SUCCESSFULLY COMPLETED.

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, WHEN USING THE MERIT POOL, THE PRACTICE

HAS BEEN TO GIVE THE CEO THE AVERAGE PERCENTAGE RAISE GIVEN TO THE STAFF.

WHEN STAFF HAVE RECEIVED INFLATIONARY RAISES ONLY, THE CEO HAS NOT RECEIVED

A RAISE.

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

THE AUDITED FINANCIAL STATEMENTS AND THE 990 TAX FORMS ARE POSTED ON THE

ORGANIZATION'S WEBSITE AND ARE MADE AVAILABLE UPON REQUEST. OTHER

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

FOREIGN CURRENCY GAIN (LOSS)

4,293.

ROUNDING VARIANCE

-2.

TOTAL TO FORM 990, PART XI, LINE 9

4,291.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Employer identification number
38-2935397

INTERNATIONAL YOUTH FOUNDATION

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
INTERNATIONAL YOUTH FOUNDATION INC, S.A.R.L.A.U. - 98-1271105, 9, RUE RIYAD, APPT. 8, HASSAN, RABAT, MOROCCO	YOUTH DEVELOPMENT PROGRAMS	MOROCCO	553,165.	279,520.	INTERNATIONAL YOUTH FOUNDATION, INC.

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
RESOURCES FOR YOUTH INC - 52-2085268 32 SOUTH ST, STE 500 BALTIMORE, MD 21202	REAL ESTATE RENTALS	MARYLAND	501(C)(3)	LINE 11A, I	INTERNATIONAL YOUTH FOUNDATION	X	

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

Schedule R (Form 990) 2015

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s)		<input checked="" type="checkbox"/>
c Gift, grant, or capital contribution from related organization(s)	<input checked="" type="checkbox"/>	
d Loans or loan guarantees to or for related organization(s)		<input checked="" type="checkbox"/>
e Loans or loan guarantees by related organization(s)		<input checked="" type="checkbox"/>
f Dividends from related organization(s)		<input checked="" type="checkbox"/>
g Sale of assets to related organization(s)		<input checked="" type="checkbox"/>
h Purchase of assets from related organization(s)		<input checked="" type="checkbox"/>
i Exchange of assets with related organization(s)		<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets to related organization(s)		<input checked="" type="checkbox"/>
k Lease of facilities, equipment, or other assets from related organization(s)	<input checked="" type="checkbox"/>	
l Performance of services or membership or fundraising solicitations for related organization(s)		<input checked="" type="checkbox"/>
m Performance of services or membership or fundraising solicitations by related organization(s)		<input checked="" type="checkbox"/>
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		<input checked="" type="checkbox"/>
o Sharing of paid employees with related organization(s)		<input checked="" type="checkbox"/>
p Reimbursement paid to related organization(s) for expenses		<input checked="" type="checkbox"/>
q Reimbursement paid by related organization(s) for expenses		<input checked="" type="checkbox"/>
r Other transfer of cash or property to related organization(s)		<input checked="" type="checkbox"/>
s Other transfer of cash or property from related organization(s)		<input checked="" type="checkbox"/>

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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) RESOURCES FOR YOUTH INC	K	89,043.FMV	
(2) RESOURCES FOR YOUTH INC	C	659,669.CASH	
(3)			
(4)			
(5)			
(6)			

Provide additional information for responses to questions on Schedule R (see instructions).

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. INTERNATIONAL YOUTH FOUNDATION	Employer identification number (EIN) or 38-2935397
	Number, street, and room or suite no. If a P.O. box, see instructions. 32 SOUTH STREET, NO. 500	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BALTIMORE, MD 21202	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

SAMANTHA BARBEE

- The books are in the care of ► **32 SOUTH STREET, NO. 500 - BALTIMORE, MD 21202**
Telephone No. ► **410-951-1500** Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2016**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2015** or
► ☐ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	INTERNATIONAL YOUTH FOUNDATION	38-2935397
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	32 SOUTH STREET, NO. 500	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	BALTIMORE, MD 21202	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

SAMANTHA BARBEE

• The books are in the care of **32 SOUTH STREET, NO. 500 - BALTIMORE, MD 21202**

Telephone No. **410-951-1500**

Fax No. ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2016.**

5 For calendar year **2015**, or other tax year beginning ☐ and ending ☐.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE RETURN WILL NOT BE AVAILABLE UNTIL AFTER THE FIRST EXTENDED DUE DATE.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature 

Title **CPA**

Date **7/11/16**

Form 8868 (Rev. 1-2014)