

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning _____ and ending _____																										
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization INTERNATIONAL YOUTH FOUNDATION</td> <td>D Employer identification number 38-2935397</td> </tr> <tr> <td colspan="2">Doing business as</td> <td rowspan="3">E Telephone number (410) 951-1500</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2">1 E PRATT STREET 701</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code BALTIMORE, MD 21202</td> <td>G Gross receipts \$ 22,554,172.</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: SUSAN REICHLER SAME AS C ABOVE</td> <td> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ </td> </tr> <tr> <td colspan="3"> I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 </td> </tr> <tr> <td colspan="3">J Website: WWW.IYFNET.ORG</td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1990 M State of legal domicile: IL</td> </tr> </table>	C Name of organization INTERNATIONAL YOUTH FOUNDATION		D Employer identification number 38-2935397	Doing business as		E Telephone number (410) 951-1500	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	1 E PRATT STREET 701		City or town, state or province, country, and ZIP or foreign postal code BALTIMORE, MD 21202		G Gross receipts \$ 22,554,172.	F Name and address of principal officer: SUSAN REICHLER SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: WWW.IYFNET.ORG			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1990 M State of legal domicile: IL
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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)	13	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	12	
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	88	
	6	Total number of volunteers (estimate if necessary)	12	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.	
7b	Net unrelated business taxable income from Form 990-T, line 38	34,258.		
Revenue	PUBLIC INSPECTION COPY - RETAIN FOR YOUR RECORDS		Prior Year	Current Year
			16,961,960.	14,312,691.
			2,072,372.	2,292,835.
			711,985.	1,148,549.
			41,625.	0.
			19,787,942.	17,754,075.
			3,217,962.	3,648,224.
			0.	0.
			11,224,147.	12,039,129.
			0.	0.
			7,753,682.	7,074,263.
			22,195,791.	22,761,616.
-2,407,849.	-5,007,541.			
Expenses			Beginning of Current Year	End of Year
	27,984,349.	25,831,858.		
	3,217,663.	6,959,587.		
	24,766,686.	18,872,271.		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)			
	21 Total liabilities (Part X, line 26)			
	22 Net assets or fund balances. Subtract line 21 from line 20			

Part II Signature Block

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

Sign Here	Signature of officer		Date
	YVONNA STEVENS, CFO		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	WILLIAM E TURCO, CPA		NOV 11 2019
	Firm's name ▶ RSM US LLP	Firm's EIN ▶ 42-0714325	Check if self-employed <input type="checkbox"/> PTIN P00369217
	Firm's address ▶ 9801 WASHINGTONIAN BLVD, STE 500 GAITHERSBURG, MD 20878	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 \$ 3,917,816. including grants of \$ 902,579.) (Revenue \$ 15,143.)

VIA: PATHWAYS TO WORK:

IN PARTNERSHIP WITH MASTERCARD FOUNDATION, VIA: PATHWAYS TO WORK
APPLIES A SYSTEMS APPROACH TO IMPROVE ECONOMIC OPPORTUNITIES FOR
UNDERSERVED YOUNG PEOPLE IN MOZAMBIQUE AND TANZANIA. VIA FACILITATES
SUSTAINABLE CHANGES AND REFINEMENTS IN THE TECHNICAL AND VOCATIONAL
EDUCATION AND TRAINING (TVET) AND ENTREPRENEURSHIP SYSTEMS IN BOTH
COUNTRIES. THE GOAL IS THAT COLLECTIVE BEHAVIORS OF TVET SYSTEM ACTORS,
INCLUDING GOVERNMENT, EMPLOYERS, CIVIL SOCIETY, AND YOUTH, ARE MORE
RESPONSIVE TO THE NEEDS OF YOUNG PEOPLE AND INDUSTRY. SPECIFICALLY, THE
PROGRAM IS INTEGRATING LIFE SKILLS PROGRAMMING AND CAREER SUPPORT
SERVICES-CLEARLY IDENTIFIED WORKFORCE AND INDUSTRY GAPS-INTO TECHNICAL
OFFERINGS FOR MORE THAN 21,000 YOUNG PEOPLE. THE VIA LEGACY WILL BE IN**4b** (Code:) (Expenses \$ 2,196,742. including grants of \$ 128,846.) (Revenue \$ 196,270.)

INITIATIVES IN LATIN AMERICA AND THE CARIBBEAN:

WE'VE WORKED WITH MORE THAN 70 IMPLEMENTING PARTNERS IN LATIN AMERICA
AND THE CARIBBEAN TO HELP LOCAL ORGANIZATIONS HARNESS A PASSION FOR
SUSTAINABLE YOUTH DEVELOPMENT PROJECTS THAT MEASURABLY CHANGE THE LIVES
OF UNDERSERVED YOUTH. JOVENES A BORDO IS A THREE-YEAR INITIATIVE
DESIGNED TO IMPROVE TRANSITIONS FROM SCHOOL TO THE WORKFORCE FOR UPPER
SECONDARY AND TECHNICAL EDUCATION STUDENTS IN QUINTANA ROO AND BAJA
CALIFORNIA SUR. ADELANTE (BUILDING THE TALENT PIPELINE IN SOUTHERN
PERU) AIMS TO BRING YOUNG PEOPLE INTO MARKET-RELEVANT POST-SECONDARY
TECHNICAL EDUCATION AND PROVIDE THEM WITH THE FOUNDATIONAL SKILLS TO BE
SUCCESSFUL IN THE WORLD OF WORK.**4c** (Code:) (Expenses \$ 2,063,529. including grants of \$ 307,739.) (Revenue \$ 1,044,783.)

INITIATIVES IN THE MIDDLE EAST AND NORTH AFRICA:

WE HAVE WORKED WITH YOUTH IN NORTH AFRICA AND THE MIDDLE EAST TO
STRENGTHEN EMPLOYABILITY, CAREER GUIDANCE, AND SOCIAL ENTREPRENEURSHIP.
IN MOROCCO, I:GROW REINFORCED THE TECHNICAL AND ORGANIZATIONAL STRENGTH
OF THE AGRICULTURAL INDUSTRY IN MOROCCO. I:PROGRESS WORKED WITH SCHOOLS
USING A MODEL DEVELOPED UNDER IYF'S PARS INITIATIVE TO INCREASE STUDENT
RETENTION AND ENGAGEMENT. IN JORDAN, MOPIC HAS FOCUSED ON SURVEYING AND
GATHERING DATA ON 22,400 LOW-INCOME HOUSEHOLDS IN THREE TARGETED
GOVERNORATES (IRBID, ZARQA, AND MA'AN) TO SUBSEQUENTLY REFER THEM TO
POVERTY ALLEVIATION SUPPORT SERVICES. THE SYRIAN REFUGEE EMPLOYABILITY
PROGRAM (SREP) INITIATIVE MARKED IYF'S FIRST TIME WORKING TO SUPPORT
REFUGEES AND ALIGNS WITH OUR UNWAVERING DEDICATION TO REACHING**4d** Other program services (Describe in Schedule O.)

(Expenses \$ 10,298,946. including grants of \$ 2,309,060.) (Revenue \$ 1,036,639.)

4e Total program service expenses 18,477,033.

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 Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <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
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d 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? If "Yes," complete Schedule L, Part I		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		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? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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):		
28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		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.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
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 88		
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? N/A	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a		
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 N/A 11a		
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 N/A 12b		
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? N/A	13a	
Note. See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 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	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

	1a	1b	13	12	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year			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				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.)

	10a	10b	11a	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?														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?														
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			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				X										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?				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						X								
13 Did the organization have a written whistleblower policy?							X							
14 Did the organization have a written document retention and destruction policy?							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									X					
b Other officers or key employees of the organization									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?														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?														

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A 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 **YVONNA STEVENS - (410) 951-1500**
1 E PRATT STREET, NO. 701, BALTIMORE, MD 21202

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

 Check if Schedule O contains a response or note to any line in this Part VII ☐
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for 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	X		X				0.	0.	0.
(2) ABDULAZIZ F. AL-KHAYYAL DIRECTOR	0.20	X						0.	0.	0.
(3) ALEJANDRO MAZA AYALA 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) UMRAN BEBA DIRECTOR	0.20	X						0.	0.	0.
(7) SHELDON SMITH DIRECTOR	0.20	X						0.	0.	0.
(8) RICK LITTLE DIRECTOR	0.20	X						0.	0.	0.
(9) JOSEPH MATALON DIRECTOR	0.20	X						0.	0.	0.
(10) CHRIS NASSETTA DIRECTOR	0.20	X						0.	0.	0.
(11) PETER WOICKE DIRECTOR	0.20	X						0.	0.	0.
(12) CONNIE WONG DIRECTOR	0.20	X						0.	0.	0.
(13) WILLIAM REESE CHIEF EXECUTIVE OFFICER	39.90 0.10	X		X				328,427.	0.	49,100.
(14) SUSAN REICHLER PRESIDENT & CHIEF OPERATING OFFICER	40.00			X				248,327.	0.	26,396.
(15) MIKE PEJCIC CHIEF FINANCIAL OFFICER- THRU 8/2018	39.90 0.10			X				133,165.	0.	32,841.
(16) YVONNA STEVENS CHIEF FINANCIAL OFFICER- FROM 8/2018	39.90 0.10			X				123,418.	0.	31,526.
(17) PETER SHIRAS EXECUTIVE VP, BUSINESS DEVELOPMENT	40.00				X			227,432.	0.	31,729.

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) RITU SHARMA REGIONAL DIRECT, EURASIA	40.00					X		176,599.	0.	27,015.
(19) PETULA NASH COUNTRY DIRECTOR, TANZANIA	40.00					X		174,747.	0.	43,151.
(20) HIMBER VILLARREAL DEPUTY REGIONAL DIRECTOR, AMERICAS	40.00					X		155,619.	0.	33,900.
(21) SHEERIN VESIN DIR, PRODUCT STRATEGY & COMMERCIALIZ	40.00					X		155,471.	0.	14,071.
1b Sub-total								1,723,205.	0.	289,729.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,723,205.	0.	289,729.

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 **9**

	Yes	No
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		X
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	X	
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		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
GAMETHEORY, INC 266 MAIN STREET, BURLINGTON, VT 05401	GAME DESIGN	285,965.

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 **1**

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	29,213.			
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	3,230,152.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,053,326.			
	g	Noncash contributions included in lines 1a-1f: \$		23,873.			
	h	Total. Add lines 1a-1f		14,312,691.			
Program Service Revenue	2 a	CONTRACT REVENUE	Business Code	541900	1,892,332.	1,892,332.	
	b	LICENSING FEE	541900	400,503.	400,503.		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		2,292,835.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		249,182.			249,182.
	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)			899,367.		899,367.
	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							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions			17,754,075.	2,292,835.	0.	1,148,549.

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 ☒

Do not include amounts reported on lines 5b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,553,519.	1,553,519.		
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	2,094,705.	2,094,705.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	985,911.	194,084.	791,827.	
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	8,241,268.	6,679,425.	940,363.	621,480.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	520,243.	405,913.	66,059.	48,271.
9 Other employee benefits	1,792,189.	1,452,559.	233,859.	105,771.
10 Payroll taxes	499,518.	352,816.	106,229.	40,473.
11 Fees for services (non-employees):				
a Management				
b Legal	89,329.	68,674.	20,655.	
c Accounting	147,329.	67,468.	79,861.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	46,559.		46,559.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	2,851,216.	2,583,514.	213,492.	54,210.
12 Advertising and promotion				
13 Office expenses	523,981.	440,257.	77,930.	5,794.
14 Information technology	201,004.	98,870.	93,302.	8,832.
15 Royalties				
16 Occupancy	727,908.	309,858.	418,050.	
17 Travel	1,800,499.	1,647,467.	36,781.	116,251.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	392,820.	359,287.	24,801.	8,732.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	48,099.		48,099.	
23 Insurance	32,030.		32,030.	
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 PARTICIPANT SUPPORT	75,035.	75,035.		
b MEMBERSHIP DUES/SUBSCRI	53,484.	10,367.	43,117.	
c PGM EQUIPMENT	49,404.	49,404.		
d INCOME TAX	10,524.	10,524.		
e All other expenses	25,042.	23,287.	1,589.	166.
25 Total functional expenses. Add lines 1 through 24e	22,761,616.	18,477,033.	3,274,603.	1,009,980.
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	1,582.	1	519.
	2 Savings and temporary cash investments	9,149,444.	2	11,347,410.
	3 Pledges and grants receivable, net	6,425,804.	3	2,938,393.
	4 Accounts receivable, net	664,343.	4	622,381.
	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	160,816.	9	229,123.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 313,761.		
	b Less: accumulated depreciation	10b 197,868.		
	11 Investments - publicly traded securities	145,419.	10c	115,893.
	12 Investments - other securities. See Part IV, line 11	11,402,023.	11	10,543,101.
	13 Investments - program-related. See Part IV, line 11	34,918.	12	35,038.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	27,984,349.	15	25,831,858.	
Liabilities	17 Accounts payable and accrued expenses	1,315,024.	16	25,831,858.
	18 Grants payable	1,315,024.	17	1,497,145.
	19 Deferred revenue	193,300.	18	691,645.
	20 Tax-exempt bond liabilities	1,389,706.	19	4,438,913.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	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		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	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	319,633.	24	
	26 Total liabilities. Add lines 17 through 25	3,217,663.	25	331,884.
	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.		26
27 Unrestricted net assets		10,843,691.	27	11,095,586.
28 Temporarily restricted net assets		12,581,239.	28	6,106,419.
29 Permanently restricted net assets		1,341,756.	29	1,670,266.
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		24,766,686.	33	18,872,271.
34 Total liabilities and net assets/fund balances		27,984,349.	34	25,831,858.

Form **990** (2018)

Part XI Reconciliation of Net Assets

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

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,754,075.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,761,616.
3	Revenue less expenses. Subtract line 2 from line 1	3	-5,007,541.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24,766,686.
5	Net unrealized gains (losses) on investments	5	-813,107.
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	-73,769.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	18,872,269.

Part XII Financial Statements and Reporting

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

☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	<input checked="" type="checkbox"/>
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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	<input checked="" type="checkbox"/>
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.	2c	<input checked="" type="checkbox"/>
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	<input checked="" type="checkbox"/>
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	3b	<input checked="" type="checkbox"/>

Form **990** (2018)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

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

The organization is not a private foundation because it is: (For lines 1 through 12, 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- 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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 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						

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	12,332,807.	20,496,294.	13,213,384.	16,961,960.	14,312,691.	77,317,136.
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	12,332,807.	20,496,294.	13,213,384.	16,961,960.	14,312,691.	77,317,136.
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)						17,941,625.
6 Public support. Subtract line 5 from line 4.						59,375,511.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	12,332,807.	20,496,294.	13,213,384.	16,961,960.	14,312,691.	77,317,136.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	191,784.	207,000.	178,595.	201,142.	249,182.	1,027,703.
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.)	46,296.	5,197.	20,627.	41,625.		113,745.
11 Total support. Add lines 7 through 10						78,450,584.
12 Gross receipts from related activities, etc. (see instructions)					12	10,040,185.
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 2018 (line 6, column (f) divided by line 11, column (f))	14	75.68 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	73.82 %
16a 33 1/3% support test - 2018. 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 - 2017. 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 - 2018. 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 - 2017. 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"/>		

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

(Complete only if you checked the box on line 10 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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 (explain in Part VI.) 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) 2018

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 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

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

2014 AMOUNT: \$ 46,296.

2015 AMOUNT: \$ 5,197.

2016 AMOUNT: \$ 20,627.

2017 AMOUNT: \$ 41,625.

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

OMB No. 1545-0047

2018

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

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 foundation

Check 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 (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
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		\$ 1,044,774.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 2,421,820.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 454,956.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 537,449.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 749,230.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

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
7		\$ 498,124.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 346,926.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 2,299,351.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 1,348,943.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12		\$ 462,001.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
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
13		\$ 1,054,668.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14		\$ 902,317.	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.)
		\$	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.)

Name of organization

Employer identification number

INTERNATIONAL YOUTH FOUNDATION

38-2935397

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

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
	(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.**

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

OMB No. 1545-0047

2018
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 7/25/06, 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

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

Schedule D (Form 990) 2018

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
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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	5,150,206.	4,398,510.	4,537,121.	4,409,160.	4,223,621.
b Contributions	328,509.	31,750.	34,000.	201,000.	33,700.
c Net investment earnings, gains, and losses	-228,838.	799,946.	-52,611.	-73,039.	151,839.
d Grants or scholarships					
e Other expenditures for facilities and programs	140,000.	80,000.	120,000.		
f Administrative expenses					
g End of year balance	5,109,877.	5,150,206.	4,398,510.	4,537,121.	4,409,160.

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

- a Board designated or quasi-endowment ☐ 64.03 %
 b Permanent endowment ☐ 32.68 %
 c Temporarily restricted endowment ☐ 3.29 %

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(i), 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		54,139.	31,671.	22,468.
d Equipment		259,622.	166,197.	93,425.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				115,893.

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) DEFERRED RENT	331,884.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	331,884.

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 ☒

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	16,820,640.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-813,107.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-73,769.
e	Add lines 2a through 2d	2e	-886,876.
3	Subtract line 2e from line 1	3	17,707,516.
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	46,559.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	46,559.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	17,754,075.

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	22,715,057.
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	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	22,715,057.
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	46,559.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	46,559.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	22,761,616.

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:

IYF IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF

SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). IN ADDITION, IYF

QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED

AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION, INCOME, WHICH IS NOT

RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO

Part XIII Supplemental Information *(continued)*

FEDERAL AND STATE CORPORATE INCOME TAXES. FOR THE YEAR ENDED DECEMBER 31,

2018, IYF HAD NET UNRELATED BUSINESS INCOME OF APPROXIMATELY \$60,000.

MANAGEMENT HAS EVALUATED IYF'S TAX POSITIONS AND HAS CONCLUDED THAT IYF HAS

TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL

STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. IYF FILES TAX

RETURNS IN THE U.S. FEDERAL JURISDICTIONS. GENERALLY, IYF IS NO LONGER

SUBJECT TO U.S. FEDERAL OR STATE AND LOCAL INCOME TAX EXAMINATIONS BY TAX

AUTHORITIES FOR YEARS BEFORE 2015.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

GAIN OR (LOSS) FOREIGN CURRENCY -73,769.

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.

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

OMB No. 1545-0047

2018Open 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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
MIDDLE EAST AND NORTH AFRICA	3	20	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	1,323,306.
RUSSIA AND NEIGHBORING STATES	1	8	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	283,327.
NORTH AMERICA	2	12	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	1,216,705.
SUB-SAHARAN AFRICA	4	52	PROGRAM SERVICES	YOUTH DEVELOPMENT PROGRAMS	2,726,589.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS		20,000.
EAST ASIA AND THE PACIFIC	0	0	GRANTS		183,122.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS		40,000.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS		307,739.
3 a Subtotal	10	92			6,100,788.
b Total from continuation sheets to Part I	0	0			1,543,844.
c Totals (add lines 3a and 3b)	10	92			7,644,632.

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

Schedule F (Form 990) 2018

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	YOUTH DEVELOPMENT PROGRAMS	167,787.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	191,531.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	67,628.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	YOUTH DEVELOPMENT PROGRAMS	48,580.	WIRE TRANSFER	0.		
		NORTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	17,887.	WIRE TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	YOUTH DEVELOPMENT PROGRAMS	118,793.	WIRE TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	YOUTH DEVELOPMENT PROGRAMS	86,755.	WIRE TRANSFER	0.		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	114,519.	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

1

3 Enter total number of other organizations or entities

15

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	41,896.	WIRE TRANSFER	0.		
		SOUTH AMERICA	YOUTH DEVELOPMENT PROGRAMS	94,773.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	411,277.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	69,143.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	18,189.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	422,148.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	YOUTH DEVELOPMENT PROGRAMS	45,209.	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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	CENTRAL AMERICA AND THE CARIBBEAN	8	20,000.	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	EAST ASIA AND THE PACIFIC	10	20,000.	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	EUROPE (INCLUDING ICELAND & GREENLAND)	20	40,000.	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	NORTH AMERICA	20	40,000.	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	SOUTH AMERICA	20	41,060.	WIRE TRANSFER	0.		
STIPENDS AND CASH AWARDS FOR LOCAL YOUTH PROJECTS	SUB-SAHARAN AFRICA	10	20,000.	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; don't 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; don't file with Form 990) ☒ Yes ☐ No

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. See instructions.

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 GRANTEEES 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 GRANTEEES NORMALLY

REPORT BOTH PROGRAMMATICALLY AND FINANCIALLY TWICE A YEAR. HIGH RISK

GRANTEEES 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 GRANTEEES 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. See instructions.

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

LAID 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 I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018
**Open to Public
Inspection**

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number
38-2935397

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
YOUTH EMPOWERMENT PROJECT 1600 ORETHA CASTLE HALEY BLVD NEW ORLEANS, LA 70113	42-1633060	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT PROGRAMS
BALTIMORE CITY FOUNDATION, INC. 7 E. REDWOOD STREET 10TH FLOOR BALTIMORE, MD 21202	52-1212473	501(C)(3)	6,870.	0.			YOUTH DEVELOPMENT PROGRAMS
BALTIMORE CITY PUBLIC SCHOOLS ALTERNATIVE PROGRAMS - 1101 N. WOLFE STREET - BALTIMORE, MD 21213	52-2064235	501(C)(3)	17,000.	0.			YOUTH DEVELOPMENT PROGRAMS
NEBRASKA CHILDREN AND FAMILIES FOUNDATION - 215 CENTENNIAL MALL S STE 200 - LINCOLN, NE 68508	91-1829974	501(C)(3)	35,000.	0.			YOUTH DEVELOPMENT PROGRAMS
COMMUNITIES IN SCHOOLS OF THE PERMIAN BASIN, INC. - PO BOX 10532 - MIDLAND, TX 79702	75-2821486	501(C)(3)	93,504.	0.			YOUTH DEVELOPMENT PROGRAMS
STEP FORWARD, NLA 401 EDWARDS ST STE 105 SHREVEPORT, LA 71101-5508	81-3564548	501(C)(3)	145,680.	0.			YOUTH DEVELOPMENT PROGRAMS

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 16.
- 3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2018)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF HOUSTON-VICTORIA 5000 GULF FWY BLDG 1 RM 109 HOUSTON, TX 77204-0907	74-6001399	501(C)(3)	48,903.	0.			YOUTH DEVELOPMENT PROGRAMS
WORKFORCE SOLUTIONS GOLDEN CRESCENT - PO BOX 1936 - VICTORIA, TX 77902	74-2877832	GOV'T	25,002.	0.			YOUTH DEVELOPMENT PROGRAMS
ASPIRA INC OF PUERTO RICO PO BOX 29132 SAN JUAN, PR 00929	66-0276355	501(C)(3)	28,500.	0.			YOUTH DEVELOPMENT PROGRAMS
FLORIDA DISTRICT OF KEY CLUB INTERNATIONAL, INC. - 1205 W AIRPORT BLVD - SANFORD, FL 32773	46-0924437	501(C)(3)	23,000.	0.			YOUTH DEVELOPMENT PROGRAMS
THE ODYSSEY AFTER SCHOOL ENRICHMENT PROGRAM - PO BOX 237 - ROCKPORT, TX 78381	71-0916426	501(C)(3)	20,300.	0.			YOUTH DEVELOPMENT PROGRAMS
MARTHA O'BRYAN CENTER 711 SOUTH 7TH STREET NASHVILLE, TN 37206	62-0477728	501(C)(3)	106,558.	0.			YOUTH DEVELOPMENT PROGRAMS
SKILLS FOR CHICAGOLAND'S FUTURE 191 N WACKER DRIVE SUITE 1150 CHICAGO, IL 60606	45-1287418	501(C)(3)	175,038.	0.			YOUTH DEVELOPMENT PROGRAMS
PHALANX FAMILY SERVICES 1201 W 115TH ST CHICAGO, IL 60643	36-4468891	501(C)(3)	201,875.	0.			YOUTH DEVELOPMENT PROGRAMS
CENTRAL STATES SER 3948 W 26TH STREET NO 213 CHICAGO, IL 60623	36-1211270	501(C)(3)	213,750.	0.			YOUTH DEVELOPMENT PROGRAMS

Schedule I (Form 990)

Part II	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
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[illegible]

Schedule I (Form 990)

Part III**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other 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 GRANTEEES 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

Part IV Supplemental Information

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

Part IV Supplemental Information

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.**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

Part I Questions Regarding Compensation

	Yes	No
<p>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.</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </div> <div> <input checked="" type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </div> </div>		
<p>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</p>	1b	X
<p>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 on line 1a?</p>	2	X
<p>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.</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </div> <div> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </div> </div>		
<p>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:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	4a	X
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b	X
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p>	4c	X
<p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>		
<p>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:</p>		
<p>a The organization?</p>	5a	X
<p>b Any related organization?</p>	5b	X
<p>If "Yes" on line 5a or 5b, describe in Part III.</p>		
<p>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:</p>		
<p>a The organization?</p>	6a	X
<p>b Any related organization?</p>	6b	X
<p>If "Yes" on line 6a or 6b, describe in Part III.</p>		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>	7	X
<p>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</p>	8	X
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9	

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM REESE CHIEF EXECUTIVE OFFICER	(i)	313,940.	0.	14,487.	28,634.	23,141.	380,202.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SOSAM REICHEL PRESIDENT & CHIEF OPERATING OFFICER	(i)	247,076.	0.	1,251.	22,645.	8,748.	279,720.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MIKE PEJCIC CHIEF FINANCIAL OFFICER- THRU 8/2018	(i)	132,724.	0.	441.	12,602.	24,001.	169,768.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) YVONNA STEVENS CHIEF FINANCIAL OFFICER- FROM 8/2018	(i)	123,193.	0.	225.	11,633.	21,169.	156,220.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) PETER SHIRAS EXECUTIVE VP, BUSINESS DEVELOPMENT	(i)	221,337.	0.	6,095.	20,249.	13,681.	261,362.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) RITU SHARMA REGIONAL DIRECT, EURASIA	(i)	175,744.	0.	855.	16,185.	13,422.	206,206.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PETULA NASH COUNTRY DIRECTOR, TANZANIA	(i)	134,234.	0.	40,513.	12,127.	33,376.	220,250.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) HIMBER VILLARREAL DEPUTY REGIONAL DIRECTOR, AMERICAS	(i)	94,659.	0.	60,960.	9,038.	25,762.	190,419.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) SHEERIN VESIN DIR, PRODUCT STRATEGY & COMMERCIALIZ	(i)	155,187.	0.	284.	14,071.	2,505.	172,047.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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 1a:

PETULA NASH RECEIVED TAXABLE HOUSING IN THE AMOUNT OF \$39,962. P. NASH IS
AN EXPATRIATE STATIONED IN TANZANIA; IYF PROVIDES THE USUAL BENEFITS FOR
HOME LEAVE AND TAX EQUALIZATION. THIS AMOUNT IS INCLUDED IN PART II, COLUMN
B(III).

TAX INDEMNIFICATION IS OFFERED TO EXPATRIATE EMPLOYEES. FOR THE YEAR
ENDING 12/31/2018 NO TAX INDEMNIFICATION PAYMENTS WERE MADE.

PART I, LINE 4a:

HIMBER VILLARREAL RECEIVED A SEVERANCE PAYMENT DURING THE CALENDAR YEAR.
THE PAYMENT IS INCLUDED IN PART VII, COLUMN D AND SCHEDULE J, PART II,
COLUMN BIII. THE TERMS AND CONDITIONS OF THE CONFIDENTIAL AGREEMENT ARE
AVAILABLE ONLY TO THE INTERNAL REVENUE SERVICE UPON REQUEST.

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.

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

OMB No. 1545-0047

2018

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:

THE SYSTEMIC CHANGES MADE AT INSTITUTIONAL LEVELS AND ACROSS AN ARRAY

OF YOUTH TRAINING AND SUPPORT SERVICES STAKEHOLDERS, LEADING TO

SIGNIFICANT NUMBERS OF YOUTH BENEFITING FROM THESE ADVANCES OVER TIME.

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

UNDERSERVED YOUTH AROUND THE WORLD. THROUGH SREP, WE WORKED WITH LOCAL

NGOS TO DEVELOP BEST PRACTICES FOR AIDING YOUNG REFUGEES AGES 18 TO 29

IN ISTANBUL TO GAIN EMPLOYMENT.

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

YOUTH OPPORTUNITY:

DRIVEN BY THE KNOWLEDGE THAT TOO MANY YOUNG PEOPLE FACE BARRIERS TO

EMPLOYMENT AND SUCCESS, IYF AND MCDONALD'S HAVE JOINED FORCES UNDER THE

YOUTH OPPORTUNITY INITIATIVE, PART OF MCDONALD'S SCALE FOR GOOD. THIS

PARTNERSHIP IS WORKING TO EQUIP YOUNG MEN AND WOMEN WITH THE SKILLS TO

SECURE A FIRST JOB AND TO POSITION THEM FOR CAREER ADVANCEMENT. YOUTH

OPPORTUNITY UTILIZES IYF'S PASSPORT TO SUCCESS (PTS) CURRICULUM TO

REACH YOUTH PARTICIPANTS WITH LIFE SKILLS SUCH AS TEAMWORK AND

RESPONSIBILITY, WHICH EMPLOYERS ACROSS SECTORS REQUIRE BUT STRUGGLE TO

FIND. IN 2018, IYF AND MCDONALD'S BEGAN PILOTING THE INITIATIVE IN

CHICAGO, WHERE TRUSTED COMMUNITY-BASED ORGANIZATIONS PAIR RELEVANT

SKILLS TRAINING PROGRAMS WITH A SPECIALIZED VERSION OF PTS.

EXPENSES \$ 1,819,692. INCLUDING GRANTS OF \$ 953,202. REVENUE \$ 0.

GLOBAL INITIATIVES:

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization	INTERNATIONAL YOUTH FOUNDATION	Employer identification number	38-2935397
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THE INTERNATIONAL YOUTH FOUNDATION HAS FOUR 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 INCREASING

THE LIFE SKILLS OF YOUNG JOBSEEKERS. THE CURRICULUM HAS BEEN TRANSLATED

INTO 20 LANGUAGES AND IMPLEMENTED IN MORE THAN 50 COUNTRIES.

- IN PARTNERSHIP WITH THE CATERPILLAR FOUNDATION, EQUIPYOUTH PREPARES

YOUNG PEOPLE WITH MARKET-RELEVANT LIFE AND TECHNICAL SKILLS TRAINING,

INTERNSHIPS, ON-THE-JOB LEARNING, AND JOB PLACEMENT SUPPORT AND

SERVICES. IN 2016, EQUIPYOUTH WAS ACTIVE IN INDONESIA, ISRAEL, MEXICO,

PALESTINE, AND PERU.

- THE HILTON PARTNERSHIP HAS OFFERED LIFE SKILLS TRAINING TO YOUNG TEAM

MEMBERS IN HILTON PROPERTIES ACROSS FOUR CONTINENTS.

- (RE)CONNECTING YOUTH: EXCHANGING GLOBAL LESSONS SHARED INNOVATIVE

GLOBAL APPROACHES FOR INCREASING YOUTH CONNECTION AND RESILIENCE WITH

PRACTITIONERS, POLICYMAKERS, AND FUNDERS IN THE UNITED STATES.

EXPENSES \$ 1,775,128. INCLUDING GRANTS OF \$ 167,787. REVENUE \$ 383,695.

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. IN THE SPORT FOR KENYAN YOUTH EMPLOYMENT (SKYE)

INITIATIVE, SOCCER WAS A KEY PART OF A DYNAMIC TRAINING MODEL ENABLING

YOUTH PARTICIPANTS AGES 18 TO 25 FROM NAIROBI'S EASTLANDS AREA TO

SECURE QUALITY JOBS IN THE CONSTRUCTION SECTOR. THE MOZAL-FUNDED

INITIATIVES EQUIP MOZAMBIKAN YOUTH AND WOMEN WITH THE KNOWLEDGE AND

SKILLS TO ACCESS AND SUCCEED IN SELF- OR SALARIED EMPLOYMENT OR TO

Name of the organization	INTERNATIONAL YOUTH FOUNDATION	Employer identification number	38-2935397
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PURSUED ADDITIONAL EDUCATION, ESCOLHAS AND DZIMA WORK WITH IN-SCHOOL AND

OUT-OF-SCHOOL YOUTH, RESPECTIVELY, PROVIDING LIFE SKILLS AND

EMPLOYABILITY TRAINING AND CAREER GUIDANCE. BHINDZULA WORKED WITH WOMEN

ENTREPRENEURS TO EXPAND THEIR ECONOMIC OPPORTUNITIES AND GROW THEIR

EXISTING ENTERPRISES.

EXPENSES \$ 1,475,141. INCLUDING GRANTS OF \$ 69,143. REVENUE \$ 24,556.

YOUTHACTIONNET:

YOUTHACTIONNET WORKS TO STRENGTHEN AND EXPAND THE IMPACT OF YOUTH-LED

SOCIAL VENTURES AROUND THE GLOBE. IT HAS CREATED ONE OF THE WORLD'S

LARGEST NETWORKS OF YOUNG SOCIAL ENTREPRENEURS COMPRISING 1,700 YOUNG

LEADERS ACROSS 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 FELLOW BENEFITS

FROM ADVANCED LEADERSHIP TRAINING, COACHING/MENTORING, ADVOCACY,

FUNDING, AND NETWORKING OPPORTUNITIES. AT THE LOCAL LEVEL,

YOUTHACTIONNET MAINTAINS A NETWORK OF NATIONAL AND 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

SKILLS THEY NEED TO STRENGTHEN AND SCALE UP THEIR SOCIAL CHANGE

VENTURES.

EXPENSES \$ 1,170,642. INCLUDING GRANTS OF \$ 181,060. REVENUE \$ 7,167.

LEAPS:

LEAPS CREATES PARTNERSHIPS WITH LOCAL ORGANIZATIONS IN WEST TEXAS,

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

SOUTH TEXAS, AND NORTHWEST LOUISIANA TO EQUIP THE AREAS' YOUNG PEOPLE-AGES 11 TO 24-WITH THE SKILLS NEEDED TO SUCCEED IN SCHOOL, WORK, AND LIFE AND TO BECOME MORE ENGAGED MEMBERS OF THEIR COMMUNITIES. WORKING WITH AND THROUGH LOCAL YOUTH-SERVING ENTITIES SUCH AS MIDDLE AND HIGH SCHOOLS, COMMUNITY COLLEGES, AND LOCAL NON-PROFITS, LEAPS FACILITATES THE EXPANSION OF EXISTING PROGRAMMING AND THE DEVELOPMENT OF SERVICES TO MAKE PROGRAMS MORE ACCESSIBLE TO YOUTH. LOCALLY TAILORED PROGRAMMING MIGHT INCLUDE SOFT SKILL TRAINING, CAREER EXPOSURE AND PLANNING, AND ENRICHMENT PROGRAMS. BY ENGAGING AND SUPPORTING COMMUNITY MEMBERS AND ORGANIZATIONS TO TARGET GAPS AND NEEDS THEY IDENTIFY AS CRITICAL, AND STRENGTHENING THE CAPACITY AND RESOURCES OF LOCAL ORGANIZATIONS, THE INITIATIVE ENSURES THAT YOUNG MEN AND WOMEN WILL REAP THE BENEFITS OF LEAPS FAR INTO THE FUTURE.

EXPENSES \$ 1,108,882. INCLUDING GRANTS OF \$ 313,089. REVENUE \$ 30,000.

USA PROGRAMS:

IYF INITIATIVES REACH YOUNG PEOPLE IN RURAL AND URBAN AREAS OF THE UNITED STATES. WITH A PILOT IN CHICAGO, THE YOUTH OPPORTUNITY INITIATIVE IS WORKING TO EQUIP YOUNG MEN AND WOMEN WITH THE SKILLS TO SECURE A FIRST JOB AND TO POSITION THEM FOR CAREER ADVANCEMENT. YOUTH OPPORTUNITY UTILIZES IYF'S PASSPORT TO SUCCESS (PTS) CURRICULUM TO REACH YOUTH PARTICIPANTS WITH LIFE SKILLS SUCH AS TEAMWORK AND RESPONSIBILITY. IN WEST TEXAS, SOUTH TEXAS, AND NORTHWEST LOUISIANA, LEAPS CREATES PARTNERSHIPS WITH LOCAL ORGANIZATIONS TO EQUIP THE AREAS' YOUNG PEOPLE AGES 11 TO 24 WITH THE SKILLS NEEDED TO SUCCEED IN SCHOOL, WORK, AND LIFE AND TO BECOME MORE ENGAGED MEMBERS OF THEIR COMMUNITIES.

(RE)CONNECTING YOUTH: EXCHANGING GLOBAL LESSONS SHARED INNOVATIVE

GLOBAL APPROACHES FOR INCREASING YOUTH CONNECTION AND RESILIENCE WITH

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

PRACTITIONERS, POLICYMAKERS, AND FUNDERS IN THE UNITED STATES.

EXPENSES \$ 1,094,749. INCLUDING GRANTS OF \$ 287,228. REVENUE \$ 3,000.

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

THIS MULTI-STAKEHOLDER INITIATIVE HAS AIMED 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 HAS PROVIDED HIGH-IMPACT, MARKET-RELEVANT TRAINING AND

SERVICES TO DISADVANTAGED YOUTH AGES 15 TO 29 AND MOBILIZED THE SUPPORT

OF AT LEAST 1,500 EMPLOYERS IN 12 COUNTRIES. BRINGING TOGETHER

STAKEHOLDERS FROM THE PUBLIC, PRIVATE, AND CIVIL SECTORS, NEO HAS

SUPPORTED THE FORMATION AND GROWTH OF ALLIANCES IN 10 COUNTRIES WITH

FINANCIAL RESOURCES, TECHNICAL SUPPORT, AND CAPACITY STRENGTHENING

SERVICES.

EXPENSES \$ 1,081,088. INCLUDING GRANTS OF \$ 136,668. REVENUE \$ 517,721.

INITIATIVES IN EURASIA:

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

MENTORING TO SUCCEED AS EMPLOYEES, ENTREPRENEURS, LEADERS, AND

COMMUNITY MEMBERS. IN THE ATYRAU REGION OF KAZAKHSTAN, THE

COMMUNITY-DRIVEN ZANGAR INITIATIVE HAS TWO KEY STRATEGIES: CREATING AN

ENVIRONMENT SUPPORTIVE OF YOUTH LEARNING AND PROFESSIONAL

SKILL-BUILDING AND EXPANDING PROGRAMMING FOR LIFE SKILLS AND SCIENCE,

TECHNOLOGY, ENGINEERING, AND MATHEMATICS (STEM) EDUCATION. ZANGAR

PARTICIPANTS ALSO DEEPEN COMPLEMENTARY LIFE SKILLS THROUGH IYF'S

PASSPORT TO SUCCESS CURRICULUM.

EXPENSES \$ 772,624. INCLUDING GRANTS OF \$ 200,883. REVENUE \$ 70,500.

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

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

JORDAN, TANZANIA, ZIMBABWE, TUNISIA,

MOROCCO, MEXICO, KAZAKHSTAN, OTHER COUNTRY,

MOZAMBIQUE

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

990 REVIEW PROCESS

1. FORMS ARE COMPLETED BY CONTROLLER, CFO AND TAX ACCOUNTANTS
2. FORMS REVIEWED BY IYF'S ATTORNEYS.
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.

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number
38-2935397

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

IYF DOES NOT TREAT COMPENSATION FOR OFFICERS OR OTHER KEY EMPLOYEES DIFFERENTLY FROM THE COMPENSATION OF OTHER STAFF. IT IS IYF'S PRACTICE TO TREAT COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER IN A SIMILAR MANNER TO THAT OF ALL STAFF COMPENSATION. IYF ESTABLISHES AND MAINTAINS SALARY LEVELS THAT ARE COMPETITIVE IN RELATION TO THE MARKETS WITHIN WHICH IT COMPETES FOR EMPLOYEES. IYF AIMS TO KEEP ALL SALARY RANGES COMPARABLE TO INDUSTRY STANDARDS. MARKET SALARIES ARE REVIEWED EVERY 3-5 YEARS BY INDEPENDENT COMPENSATION CONSULTANTS.

ANNUAL INCREASES ARE DETERMINED BY THE EXECUTIVE MANAGEMENT TEAM (EMT) AND APPROVED BY THE BOARD OF DIRECTORS. THEY ARE BASED ON MARKET TRENDS (I.E. WHAT INCREASES OTHER ORGANIZATIONS ARE PROVIDING) AS WELL AS THE AVAILABILITY OF FUNDING WHILE CONTINUING TO RECOGNIZE STAFF FOR THEIR EFFORTS AND VALUABLE CONTRIBUTIONS TO IYF. TO DETERMINE MARKET SALARY INCREASES, 2-3 SALARY SURVEYS FOR SIMILAR MARKETS ARE REVIEWED. RAISES ARE DEVELOPED USING MARKET INFORMATION AND IYF FINANCIAL POSITION AS THE INFORMING FACTORS.

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:

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

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

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

DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTANT FEES:

PROGRAM SERVICE EXPENSES 2,113,228.

MANAGEMENT AND GENERAL EXPENSES 188,294.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 2,301,522.

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES 408,467.

MANAGEMENT AND GENERAL EXPENSES 10,473.

FUNDRAISING EXPENSES 54,210.

TOTAL EXPENSES 473,150.

RECRUITMENT FEES:

PROGRAM SERVICE EXPENSES 8,555.

MANAGEMENT AND GENERAL EXPENSES 14,725.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 23,280.

TEMPORARY STAFF:

PROGRAM SERVICE EXPENSES 20,994.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 20,994.

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number

38-2935397

CONTRACT:

PROGRAM SERVICE EXPENSES 32,270.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 32,270.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 2,851,216.

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

FOREIGN CURRENCY GAIN (LOSS) -73,769.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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.**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

INTERNATIONAL YOUTH FOUNDATION

Employer identification number
38-2935397

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	830,828.	344,872.	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	SUPPORTING ORGANIZATION	MARYLAND	501(C)(3)	LINE 12A, I	INTERNATIONAL YOUTH FOUNDATION	X	

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

Schedule R (Form 990) 2018

[illegible][illegible]

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	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

► **File a separate application for each return.**
► **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 990-T, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request 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/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (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. 1 E PRATT STREET, NO. 701	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) 0 1

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

YVONNA STEVENS

- The books are in the care of ► 1 E PRATT STREET, NO. 701 - 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 6-month extension of time until NOVEMBER 15, 2019, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year 2018 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.