See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
EXTENSION GRANTED THROUGH 5/17/10
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable
   [ ] Address change [ ] Name change [ ] Initial return [ ] Amended return [ ] Application pending
   C Name of organization
   YOUTH POLICY INSTITUTE, INC.
   Doing Business As
   D Employer identification number
   52-1278339
   E Telephone number
   213-6882802
   G Gross receipts
   14,573,001
   H(a) Is this a group return for affiliates? [ ] Yes [ ] No
   H(b) Are all affiliates included? [ ] Yes [ ] No

J Website: [ ] N/A

K Type of organization: [ ] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 1983 [ ] State of legal domicile: DC

[Part I] Summary

1 Briefly describe the organization's mission or most significant activities: EDUCATIONAL TECHNOLOGY AND WORKFORCE TRAINING

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 5% of its assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of employees (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total gross unrelated business revenue from Part VIII, line 12, column a

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1b)

9 Program service revenue (Part VIII, line 2a)

10 Investment income (Part VIII, column A, lines 3, 4, and 7d)

11 Other revenue (Part VIII, column A, lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column A, line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column A, lines 1-3)

14 Benefits paid to or for members (Part IX, column A, line 4)

15 Salaries, other compensation, employee benefits (Part IX, column A, lines 5-10)

16a Professional fundraising fees (Part IX, column A, line 11e)

b Total fundraising expenses (Part IX, column D, line 25)

17 Other expenses (Part IX, column A, lines 11a-11d, 11e-24d)

18 Total expenses. Add lines 13-27 (must equal Part IX, column A, line 25)

19 Revenue less expenses. Subtract line 18 from line 12

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

Sign Here [ ] Signature of officer [ ] Date

DIXON SLINGERLAND, EXECUTIVE DIRECTOR

Type or print name and title

Preparer's signature [ ] Date 5/17/10

Check if self-employed [ ]

Preparer's identifying number (see instructions)

VASQUEZ & COMPANY LLP
801 S. GRAND AVE., SUITE 400
LOS ANGELES, CALIFORNIA 90017

Phone no (213) 629-9094

May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)
Part III: Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization’s mission: See Schedule O for continuation.

   The Youth Policy Institute (YPI) provides education, training and technology services to lift low-income families out of poverty. YPI offers families education and training resources in the areas of afterschool, job training, early childhood education, physical

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 exempt purpose achievements for each of the organization’s three largest program services by expenses.

   Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $11,595,076. Including grants of $ ) (Revenue $ )

   AGENCY PROVIDED EDUCATIONAL, TECHNOLOGY AND TRAINING TO LOW INCOME
   YOUTH AND FAMILIES IN LOS ANGELES. 8,000 FAMILIES IN THE COMMUNITY WERE
   SERVED

4b (Code: ) (Expenses $ ) (Revenue $ )

4c (Code: ) (Expenses $ ) (Revenue $ )

4d Other program services. (Describe in Schedule O.)

   (Expenses $ ) (Revenue $ )

4e Total program service expenses $11,595,076. (Must equal Part IX, Line 25, column (B).)
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part IV. Checklist of Required Schedules</strong></td>
<td></td>
</tr>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>If “Yes,” complete Schedule A</strong></td>
<td></td>
</tr>
<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td></td>
</tr>
<tr>
<td>3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <strong>If “Yes,” complete Schedule C, Part I</strong></td>
<td></td>
</tr>
<tr>
<td>4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <strong>If “Yes,” complete Schedule C, Part II</strong></td>
<td></td>
</tr>
<tr>
<td>5. Section 501(c)(4), 501(c)(6), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <strong>If “Yes,” complete Schedule C, Part III</strong></td>
<td></td>
</tr>
<tr>
<td>6. Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <strong>If “Yes,” complete Schedule D, Part I</strong></td>
<td></td>
</tr>
<tr>
<td>7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <strong>If “Yes,” complete Schedule D, Part II</strong></td>
<td></td>
</tr>
<tr>
<td>8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? <strong>If “Yes,” complete Schedule D, Part III</strong></td>
<td></td>
</tr>
<tr>
<td>9. Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <strong>If “Yes,” complete Schedule D, Part IV</strong></td>
<td></td>
</tr>
<tr>
<td>10. Did the organization hold assets in term, permanent, or quasi-endowments? <strong>If “Yes,” complete Schedule D, Part V</strong></td>
<td></td>
</tr>
<tr>
<td>11. Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <strong>If “Yes,” complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</strong></td>
<td></td>
</tr>
<tr>
<td>12. Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <strong>If “Yes,” complete Schedule D, Parts XI, XII, and XIII</strong></td>
<td></td>
</tr>
<tr>
<td>13. Is the organization a school as described in section 170(b)(1)(A)(ii)? <strong>If “Yes,” complete Schedule E</strong></td>
<td></td>
</tr>
<tr>
<td>14a. Did the organization maintain an office, employees, or agents outside of the U.S.?</td>
<td></td>
</tr>
<tr>
<td>b. Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <strong>If “Yes,” complete Schedule F, Part I</strong></td>
<td></td>
</tr>
<tr>
<td>15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? <strong>If “Yes,” complete Schedule F, Part II</strong></td>
<td></td>
</tr>
<tr>
<td>16. Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? <strong>If “Yes,” complete Schedule F, Part III</strong></td>
<td></td>
</tr>
<tr>
<td>17. Did the organization report more than $15,000 on Part IX, column (A), line 11e? <strong>If “Yes,” complete Schedule G, Part I</strong></td>
<td></td>
</tr>
<tr>
<td>18. Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? <strong>If “Yes,” complete Schedule G, Part II</strong></td>
<td></td>
</tr>
<tr>
<td>19. Did the organization report more than $15,000 on Part VIII, line 9a? <strong>If “Yes,” complete Schedule G, Part III</strong></td>
<td></td>
</tr>
<tr>
<td>20. Did the organization operate one or more hospitals? <strong>If “Yes,” complete Schedule H</strong></td>
<td></td>
</tr>
<tr>
<td>21. Did the organization report more than $5,000 on Part IX, column (A), line 17? <strong>If “Yes,” complete Schedule I, Parts I and II</strong></td>
<td></td>
</tr>
<tr>
<td>22. Did the organization report more than $5,000 on Part IX, column (A), line 27? <strong>If “Yes,” complete Schedule I, Parts I and III</strong></td>
<td></td>
</tr>
<tr>
<td>23. Did the organization answer “Yes” to Part VII, Section A, questions 3, 4, or 5? <strong>If “Yes,” complete Schedule J</strong></td>
<td></td>
</tr>
<tr>
<td>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? <strong>If “Yes,” answer questions 24b-24d and complete Schedule K</strong></td>
<td></td>
</tr>
<tr>
<td><strong>If “No”, go to question 25</strong></td>
<td></td>
</tr>
<tr>
<td>b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
</tr>
<tr>
<td>c. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
</tr>
<tr>
<td>d. Did the organization act as an “on behalf of” issuer for bonds outstanding at any time during the year?</td>
<td></td>
</tr>
<tr>
<td>25a. Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <strong>If “Yes,” complete Schedule L, Part I</strong></td>
<td></td>
</tr>
<tr>
<td>b. Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <strong>If “Yes,” complete Schedule L, Part I</strong></td>
<td></td>
</tr>
<tr>
<td>26. Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization’s tax year? <strong>If “Yes,” complete Schedule L, Part II</strong></td>
<td></td>
</tr>
<tr>
<td>27. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <strong>If “Yes,” complete Schedule L, Part III</strong></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:</td>
<td></td>
</tr>
<tr>
<td>a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
</tr>
<tr>
<td>b Have a family member who had a direct or indirect business relationship with the organization? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
</tr>
<tr>
<td>c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If “Yes,” complete Schedule M</td>
<td></td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If “Yes,” complete Schedule M</td>
<td></td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If “Yes,” complete Schedule N, Part I</td>
<td></td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If “Yes,” complete Schedule N, Part II</td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If “Yes,” complete Schedule R, Parts II, III, IV, and V, line 1</td>
<td></td>
</tr>
<tr>
<td>35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If “Yes,” complete Schedule R, Part V, line 2</td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
</tr>
</tbody>
</table>
**Part V: Statements Regarding Other IRS Filings and Tax Compliance**

1a. Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter 0 if not applicable: **25**

1b. Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable: **0**

1c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? **X**

2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return: **1210**

2b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **X**

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (See instructions)

3a. Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return? **X**

3b. If *Yes,* has it filed a Form 990-T for this year? If *No,* provide an explanation in Schedule O

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)? **X**

4b. If *Yes,* enter the name of the foreign country: 

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **X**

5b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? **X**

5c. If *Yes,* to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?

6a. Did the organization solicit any contributions that were not tax deductible? **X**

6b. If *Yes,* did the organization include, with every solicitation an express statement that such contributions or gifts were not tax deductible?

7. Organizations that may receive deductible contributions under section 170(c).

7a. Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75? **X**

7b. If *Yes,* did the organization notify the donor of the value of the goods or services provided?

7c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

7d. If *Yes,* indicate the number of Forms 8282 filed during the year

7e. Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **X**

7f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

7g. For all contributions of qualified intellectual property, did the organization file Form 8899 as required?

7h. For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1099-C as required?

8. Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

8a. Did the organization make any taxable distributions under section 4966?

8b. Did the organization make a distribution to a donor, donor advisor, or related person?

9. Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.

9a. Did the organization make any taxable distributions under section 4966?

9b. Did the organization make a distribution to a donor, donor advisor, or related person?

10. Section 501(c)(7) organizations. Enter: **N/A**

10a. Initiation fees and capital contributions included on Part VIII, line 12

10b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11. Section 501(c)(12) organizations. Enter: **N/A**

11a. Gross income from members or shareholders

11b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

12b. If *Yes,* enter the amount of tax-exempt interest received or accrued during the year: **N/A**
Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See Instructions.

1a Enter the number of voting members of the governing body .................................................. 1a 5
1b Enter the number of voting members that are independent .................................................. 1b 0

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 organizational documents since the prior Form 990 was filed? ................................................................. 4 X

5 Did the organization become aware during the year of a material diversion of the organization's assets? ................................................................. 5 X

6 Does the organization have members or stockholders? ................................................................. 6 X

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? ................................................................. 7a X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? ................................................................. 7b X

8a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following...
8b The governing body? ...................................................................................................................... 8a X
8c Each committee with authority to act on behalf of the governing body? ........................................... 8b X

9a Does the organization have local chapters, branches, or affiliates? .................................................. 9a X
9b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .......................................................................................................................................................................................... 9b X

10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 .......................................................................................................................................................................................... 10 X

11 Is there any officer, director or 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 .......................................................................................................................................................................................... 11 X

Section B. Policies

12a Does the organization have a written conflict of interest policy? If "No," go to line 13 ........................................................................................................... 12a X
12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ........................................................................................................... 12b X
12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done .......................................................................................................................................................................................... 12c X

13 Does the organization have a written whistleblower policy? ................................................................ 13 X

14 Does the organization have a written document retention and destruction policy? ............................................... 14 X

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:
15a The organization's CEO, Executive Director, or top management official? .................................................. 15a X
15b Other officers or key employees of the organization? .................................................................................. 15b X

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .......................................................................................................................................................................................... 16a X
16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? .......................................................................................................................................................................................... 16b X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed. CA

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: THE CORPORATION - 213-688-2802

34 SOUTH SPRING STREET, 10TH FLOOR, LOS ANGELES, CA 90014

32000
12-18-08

14020517 795952 YPI 2008.05000 YOUTH POLICY INSTITUTE, INC YPI 1
### Part VII: Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- 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 the organization did not compensate any officer, director, trustee, or key employee.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAVID HACKETT PRESIDENT</td>
<td>1.00 X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>PERCY DURAN SECRETARY</td>
<td>1.00 X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>ANGELINA CORONA MEMBER</td>
<td>1.00 X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>HECTOR DE LEON MEMBER</td>
<td>1.00 X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIXON SLINGERLAND EXECUTIVE DIRECTOR</td>
<td>40.00 X</td>
<td>196,098.</td>
<td>0.</td>
<td>17,449.</td>
<td></td>
</tr>
<tr>
<td>ANA CUBAS DEPUTY DIRECTOR</td>
<td>40.00 X</td>
<td>144,354.</td>
<td>0.</td>
<td>3,600.</td>
<td></td>
</tr>
<tr>
<td>EUGENE STRAUB CHIEF OPERATING OFFICER</td>
<td>40.00 X</td>
<td>133,777.</td>
<td>0.</td>
<td>2,500.</td>
<td></td>
</tr>
<tr>
<td>(A) Name and title</td>
<td>(B) Average hours per week</td>
<td>(C) Position (check all that apply)</td>
<td>(D) Reportable compensation from the organization (W-2/1099-MISC)</td>
<td>(E) Reportable compensation from related organizations (W-2/1099-MISC)</td>
<td>(F) Estimated amount of other compensation from the organization and related organizations</td>
</tr>
<tr>
<td>--------------------</td>
<td>-----------------------------</td>
<td>------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization.

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.

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.

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person.

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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>MITCHELL SILBERBERG &amp; KNABB, 11377 WEST OLYMPIC BOULEVARD, LOS ANGELES, CA 90064</td>
<td>PROFESSIONAL LEGAL SERVICES</td>
<td>201,007</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization.
### Part VIII | Statement of Revenue

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>1e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>1e 13927125</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f 645,240</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1e-1f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1h Total. Add lines 1e-1f</td>
<td>14572365</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2g Total. Add lines 2a-2f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Gross Rents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b Less. rental expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Less. cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a Gross income from fundraising events (not including $ contributions reported on line 1c). See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b Less. direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b Less. direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Net Income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Other Revenue

| 11a PARENT FEE INCOME | 900099 | 635 | 635 |
| 11b | | | |
| 11c | | | |
| 11d All other revenue | | | |
| 11e Total. Add lines 11a-11d | 14573001 | 636 | 0 |
| 12 Total Revenue | | | |

Form 990 (2008)
<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column (A) Total Expenses</th>
<th>Column (B) Program Service Expenses</th>
<th>Column (C) Management and General Expenses</th>
<th>Column (D) Fundraising Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the U.S. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>474,229</td>
<td>474,229</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>8,387,765</td>
<td>7,404,760</td>
<td>773,199</td>
<td>209,806</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Pension plan contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>1,426,972</td>
<td>1,072,372</td>
<td>332,246</td>
<td>22,354</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>190,099</td>
<td>61,784</td>
<td>127,565</td>
<td>750</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>46,215</td>
<td>39,603</td>
<td>6,038</td>
<td>574</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other</td>
<td>155,912</td>
<td>131,762</td>
<td>10,991</td>
<td>13,159</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>319,139</td>
<td>255,998</td>
<td>61,932</td>
<td>1,209</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>52,021</td>
<td>52,021</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Other expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>SUPPLES - COMPUTER</td>
<td>665,214</td>
<td>533,727</td>
<td>131,397</td>
<td>90</td>
</tr>
<tr>
<td>b</td>
<td>BAD DEBTS</td>
<td>500,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>PROGRAM PASS THROUGH</td>
<td>321,537</td>
<td>321,537</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>EQUIPMENT LEASE</td>
<td>320,673</td>
<td>48,801</td>
<td>271,615</td>
<td>257</td>
</tr>
<tr>
<td>e</td>
<td>SUBRECIPIENT EXPENSE</td>
<td>232,922</td>
<td>248,772</td>
<td>&lt;15,850</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>All other expenses</td>
<td>1,201,931</td>
<td>989,720</td>
<td>205,342</td>
<td>6,869</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses, Add lines 1 through 24t</td>
<td>14,317,922</td>
<td>11,595,076</td>
<td>2,467,778</td>
<td>255,068</td>
</tr>
<tr>
<td>26</td>
<td>Joint Costs Check here □ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part X: Balance Sheet

<table>
<thead>
<tr>
<th></th>
<th>Assets</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(A)</td>
<td>Beginning of year</td>
<td>(B)</td>
<td>End of year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>549.1</td>
<td>316,860.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,680,860.</td>
<td>3</td>
<td>2,399,273.</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>35,789.</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,902.</td>
<td>9</td>
<td>21,258.</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost basis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>460,805.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td></td>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td></td>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td></td>
<td>15</td>
<td>6,536.</td>
<td>53,325.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td></td>
<td>16</td>
<td>1,893,883.</td>
<td>2,980,182.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>959,603.</td>
<td>1,524,173.</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td></td>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
<td></td>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td></td>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
<td>23</td>
<td>287,725.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable</td>
<td></td>
<td></td>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td></td>
<td>26</td>
<td>1,068,992.</td>
<td>1,893,062.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Organizations that follow SFAS 117, check here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>824,891.</td>
<td>1,087,120.</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td></td>
<td></td>
<td>28</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td></td>
<td></td>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Organizations that do not follow SFAS 117, check here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
<td>31</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td>32</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td></td>
<td>33</td>
<td>824,891.</td>
<td>1,087,120.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td></td>
<td>34</td>
<td>1,893,883.</td>
<td>2,980,182.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Part XI: Financial Statements and Reporting

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cash</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accrual</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2008)
**Public Charity Status and Public Support**

**To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.**

**Attach to Form 990 or Form 990-EZ. See separate Instructions.**

### Part I: Reason for Public Charity Status

All organizations must complete this part. (See instructions)

- [ ] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- [ ] A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- [ ] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
- [ ] 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:

- [ ] 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)
- [ ] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- [x] 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)
- [ ] A community trust described in section 170(b)(1)(A)(vii). (Complete Part II)
- [ ] 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 the Part III)
- [ ] An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (See instructions)
- [ ] 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 that describes the type of supporting organization and complete lines 11(e) through 11(h):
  - [ ] Type I
  - [ ] Type II
  - [ ] Type III - Functionally Integrated
  - [ ] Type III - Other
- [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- [ ] If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.

### h) Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | Yes | No |
| (ii) A family member of a person described in (i) above? | Yes | No |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? | Yes | No |

- [ ] Provides the following information about the organizations the organization supports.

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))</th>
<th>(iv) Is the organization in col. (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in col. (i) of your support?</th>
<th>(vi) Is the organization in col. (i) organized in the U.S.?</th>
<th>(vii) Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total**

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

Schedule A (Form 990 or 990-EZ) 2008
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gifts, grants, contributions, and</td>
<td>1412721</td>
<td>3212138</td>
<td>4239756</td>
<td>9509054</td>
<td>14572366</td>
<td>32946035</td>
</tr>
<tr>
<td>membership fees received (Do not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Tax revenues levied for the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's benefit and either paid to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. The value of services or facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>furnished by a governmental unit to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Total. Add lines 1 + 3</td>
<td>1412721</td>
<td>3212138</td>
<td>4239756</td>
<td>9509054</td>
<td>14572366</td>
<td>32946035</td>
</tr>
<tr>
<td>5. The portion of total contributions by</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>each person (other than a governmental</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>unit or publicly supported organization)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>included on line 1 that exceeds 2% of the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Amounts from line 4</td>
<td>1412721</td>
<td>3212138</td>
<td>4239756</td>
<td>9509054</td>
<td>14572366</td>
<td>32946035</td>
</tr>
<tr>
<td>8. Gross income from interest, dividends,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>payments received on securities, loans,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>rents, royalties and income from similar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Net income from unrelated business</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>activities, whether or not the business</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Other Income. Do not include gain or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>32946673</td>
</tr>
<tr>
<td>12. Gross receipts from related activities,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. First five years. If the Form 990 is</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>for the organization's first, second, third,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fourth, or fifth tax year as a section 501(c)(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| 14. Public support percentage for 2008 (line 6, column (f)) divided by line 11, column (f) | 14          | 100.00% |
| 15. Public support percentage from 2007 Schedule A, Part IV-A, line 28 | 15          | 100.00% |

16a 33 1/3% support test - 2008. 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.

17a 10% facts-and-circumstances test - 2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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.
### Section A. Public Support

#### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross receipts from activities that are not an unrelated trade or business under section 512</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. Add lines 1-5</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7b Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceeded the greater of 1% of the total of lines 9, 10c, 11, and 12 or the year or 50,000</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7c Add lines 7a and 7b</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

#### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Add lines 10a and 10b</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total support (Add lines 10, 11, and 12)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 2008 (line 8, column (f) divided by line 13, column (f)) |  |  |  |  |  |
| 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g |  |  |  |  |  |

#### Section D. Computation of Investment Income Percentage

| 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) |  |  |  |  |  |
| 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h |  |  |  |  |  |

19a 33 1/3% support tests - 2008. 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.

19b 33 1/3% support tests - 2007. If the organization did not check the 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.
**Schedule D**
(Form 990)
Department of the Treasury
Internal Revenue Service

**Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 8, 7, 6, 5, 10, 11, or 12.

**Name of the organization**
YOUTH POLICY INSTITUTE, INC.

**Employer Identification number**
52-1278339

### Part I: Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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? <strong>Yes</strong> <strong>No</strong></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charity's purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <strong>Yes</strong> <strong>No</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Part II: Conservation Easements

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purposes of conservation easements held by the organization (check all that apply):
   - Preservation of land for public use (e.g., recreation or pleasure)
   - Preservation of an historically important area
   - Protection of natural habitat
   - Preservation of certified historic structure
   - Preservation of open space

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

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 8/17/06</td>
</tr>
</tbody>
</table>

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? **Yes** **No**

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶

8 Does each conservation easement reported on line 2(c) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? **Yes** **No**

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 ▶ $ ▶

   (ii) Assets included in Form 990, Part X ▶ $ ▶

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

   a Revenues included in Form 990, Part VIII, line 1 ▶ $ ▶

   b Assets included in Form 990, Part X ▶ $ ▶

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

Schedule D (Form 990) 2008

LHA 14020517 705952 YPI 2008.05000 YOUTH POLICY INSTITUTE, INC YPI 1
Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's 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 XIV.

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 | Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to 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 o Form 990, Part X?
   □ Yes □ No

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

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 211?
   □ Yes □ No

b If "Yes," explain the arrangement in Part XIV.

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

1a Beginning of year balance

b Contributions

c Investment earnings or losses

d Grants or scholarships

e Other expenses for facilities and programs

f Administrative expenses

g End of year balance

2 Provide the estimated percentage of the year end balance held as:
   a Board designated or quasi-endowment ▶ %
   b Permanent endowment ▶ %
   c Term endowment ▶ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   i unrelated organizations
   □ Yes □ No
   ii related organizations
   □ Yes □ No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule A?
   □ Yes □ No

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

Part VI | Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of investment</th>
<th>(a) Cost or other basis (Investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Building</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td></td>
<td>330,968.</td>
<td>233,536.</td>
<td>97,432</td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td>105,988.</td>
<td>37,803.</td>
<td>68,185</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>330,968.</td>
<td>233,536.</td>
<td>97,432</td>
</tr>
</tbody>
</table>

Total: Add items 1a to e. (Column (d) should equal Form 990, Part X, column (B), line 10(c)) ▶ 189,466.
### Part VII  Investments - Other Securities
See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial derivatives and other financial products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VIII  Investments - Program Related
See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX  Other Assets
See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (a) should equal Form 990, Part X, col (B) line 15.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Part X  Other Liabilities
See Form 990, Part X, line 25.

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>DUE TO/FROM RELATED PARTY</td>
<td>&lt;16,633.</td>
</tr>
<tr>
<td>CREDIT CARD PAYABLE</td>
<td>97,797.</td>
</tr>
<tr>
<td><strong>Total. (Column (c) should equal Form 990, Part X, col (B) line 25.)</strong></td>
<td>81,164.</td>
</tr>
</tbody>
</table>

In Part XIV, 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.
### Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (Form 990, Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (Form 990, Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Excess or (deficit) for the year. Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>5</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>6</td>
<td>Investment expenses</td>
</tr>
<tr>
<td>7</td>
<td>Prior period adjustments</td>
</tr>
<tr>
<td>8</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>9</td>
<td>Total adjustments (net). Add lines 4-8</td>
</tr>
<tr>
<td>10</td>
<td>Excess or (deficit) for the year per financial statements. Combine lines 3 and 9</td>
</tr>
</tbody>
</table>

### Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains on investments</td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIV)</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIV)</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)</td>
</tr>
</tbody>
</table>

### Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
</tr>
<tr>
<td></td>
<td>a Donated services and use of facilities</td>
</tr>
<tr>
<td></td>
<td>b Prior year adjustments</td>
</tr>
<tr>
<td></td>
<td>c Losses reported on Form 990, Part IX, line 25</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIV)</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIV)</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)</td>
</tr>
</tbody>
</table>

### Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

**EXPENSES OVERSTATED IN PRIOR YEAR**
**Compensation Information**

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

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

| Name of the organization | YOUTH POLICY INSTITUTE, INC. | Employer identification number | 52-1278339 |

| Part I: Questions Regarding Compensation |

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

- [ ] First-class or charter travel
- [x] Housing allowance or residence for personal use
- [ ] Payments for business use of personal residence
- [ ] TAx indemnification and gross-up payments
- [ ] Health or social club dues or initiation fees
- [ ] Personal services (e.g., maid, chauffeur, chef)
- [ ] Discretionary spending account

1b. If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

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

3. Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- [ ] Compensation committee
- [ ] Written employment contract
- [ ] Independent compensation consultant
- [ ] Compensation survey or study
- [ ] Approval by the board or compensation committee

4. During the year, did any person listed in Form 990, Part VII, Section A, line 1a.

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

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

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

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

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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

   a. The organization?

   b. Any related organization?

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

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

   a. The organization?

   b. Any related organization?

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

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

8. Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Schedule J (Form 990) 2008

**YOUTH POLICY INSTITUTE, INC.**

**52-1278339**

**Page 2**

**Part II:** Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note: The sum of columns (B)-(E) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

<table>
<thead>
<tr>
<th>(A) Name</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)-(D)</th>
<th>(F) Compensation reported in prior Form 990 or Form 990-EZ</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIXON SLINGERLAND</td>
<td>(i) 194,048. 2,050. 0. 0. 0. 17,449. 213,547. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(iii)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(iv)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(v)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(vi)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(vii)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(viii)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(ix)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(x)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(xi)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(xii)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Schedule J (Form 990) 2008**

832112 12-23-08

20
### Part I: Excess Benefit Transactions

Transitions with Interested Persons (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1. **(a)** Name of disqualified person
   
<table>
<thead>
<tr>
<th>(b) Description of transaction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Corrected? Yes</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

2. Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958.

3. Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

### Part II: Loans to and/or From Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

<table>
<thead>
<tr>
<th>(e) Name of interested person and purpose</th>
<th>(b) Loan to or from the organization?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>To</td>
</tr>
<tr>
<td>(c) Original principal amount</td>
<td></td>
</tr>
<tr>
<td>(d) Balance due</td>
<td></td>
</tr>
<tr>
<td>(e) In default? Yes</td>
<td>No</td>
</tr>
<tr>
<td>(f) Approved by board or committees? Yes</td>
<td>No</td>
</tr>
<tr>
<td>(g) Written agreement? Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**Total**

$...$

### Part III: Grants or Assistance Benefiting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Relationship between interested person and the organization</td>
</tr>
<tr>
<td>(c) Amount of grant or type of assistance</td>
</tr>
</tbody>
</table>

### Part IV: Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Relationship between interested person and the organization</td>
</tr>
<tr>
<td>(c) Amount of transaction</td>
</tr>
<tr>
<td>(d) Description of transaction</td>
</tr>
</tbody>
</table>

| (e) Sharing of organization's revenues? Yes | No |

**WIFE OF DIXON SLINGERLAND/WIFE**

201,007.00, PROFESSIONAL X

---

**Note:** For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule L (Form 990 or 990-EZ) 2008

---

**SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS**
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATION, ADULT LITERACY AND ESL, COMPUTER LITERACY, CHARTER SCHOOLS, AND COLLEGE PREPARATION. YPI ALSO SUPPORTS EFFORTS TO BOOST THE CAPACITY AND EFFECTIVENESS OF SMALL GRASSROOTS NONPROFITS THAT PROVIDE ESSENTIAL SERVICES FOR YOUTH.

FORM 990, PART VI, SECTION A, LINE 2: YPI CONTRACTED THE SERVICES OF A LAW FIRM AND ONE OF ITS PARTNERS IS THE SPOUSE OF YPI'S EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION A, LINE 10: YOUTH POLICY INSTITUTE OUTSIDE AUDITORS AND FINANCE STAFF PREPARE THE FORM 990. THE FORM IS THEN REVIEWED AND APPROVED BY THE ORGANIZATION'S CONTROLLER OR CFO AND CEO. THE FORM IS THEN SENT TO THE FULL BOARD BEFORE MAILING.

FORM 990, PART VI, SECTION B, LINE 12C: YOUTH POLICY INSTITUTE, INC. (YPI) REQUIRES ALL EMPLOYEES TO DISCLOSE, AT LEAST ANNUALLY, ALL SOURCES OF INCOME FROM COMPENSATION OR FROM OWNERSHIP OF EVERY outside ENTITY THAT (A) SOLD, SUPPLIED OR PROVIDED SERVICES (B) OPERATED A COMPETING ENTERPRISE OR (C) PROVIDED GOODS OR SERVICES TO YPI IN THE LAST SIX MONTHS. YPI ALSO REQUIRES ALL DIRECTORS TO ANNUALLY SIGN A STATEMENT AFFIRMING (A) RECEIPT OF YPI CONFLICT OF INTEREST POLICY (B) UNDERSTANDING OF THE POLICY AND (C) AGREEMENT WITH THE POLICY. YPI CONFLICT OF INTEREST POLICY DESCRIBES HOW YPI WILL RESOLVE POSSIBLE CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD REVIEWED YOUTH POLICY INSTITUTE, INC. CEO'S COMPENSATION. THE BOARD REVIEWED DATA OF COMPARABLE
Supplemental Information to Form 990

Department of the Treasury
Internal Revenue Service

Name of the organization: YOUTH POLICY INSTITUTE, INC.

Employer identification number: 52-1278339

COMPENSATION FOR SIMILARLY QUALIFIED NONPROFIT EXECUTIVES. THE OCCURRENCE OF THESE DELIBERATIONS ARE NOTED IN THE BOARD MINUTES.

FORM 990, PART VI, SECTION C, LINE 19: SOME OR ALL OF THESE ITEMS MAY BE AVAILABLE AS PART OF A PUBLIC GRANT APPLICATION. HOWEVER, THERE IS NO PROCESS FOR MAKING THESE AVAILABLE TO THE PUBLIC.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: WIFE OF DIXON SLINGERLAND

(D) DESCRIPTION OF TRANSACTION: PROFESSIONAL/LEGAL FEES
### Related Organizations and Unrelated Partnerships

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. See separate instructions.

**Name of the organization**

YOUTH POLICY INSTITUTE, INC.

<table>
<thead>
<tr>
<th>Part I</th>
<th>Identification of Disregarded Entities</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Name, address, and EIN of disregarded entity</td>
<td>(B) Primary activity</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Identification of Related Tax-Exempt Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Name, address, and EIN of related organization</td>
<td>(B) Primary activity</td>
</tr>
<tr>
<td>BRRT CORONA CHARTER SCHOOL</td>
<td>PROVIDE CHARTER SCHOOL</td>
</tr>
<tr>
<td>9400 RENICE AVENUE</td>
<td></td>
</tr>
<tr>
<td>PACOIMA, CA 91331</td>
<td>SERVICES</td>
</tr>
<tr>
<td>MONSEÑOR OSCAR ROMERO CHARTER SCHOOL</td>
<td>PROVIDE CHARTER SCHOOL</td>
</tr>
<tr>
<td>507 BIXEL ST</td>
<td>SERVICES</td>
</tr>
<tr>
<td>LOS ANGELES, CA 90017</td>
<td></td>
</tr>
</tbody>
</table>

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

Schedule R (Form 990) 2008
### Part III: Identification of Related Organizations Taxable as a Partnership

<table>
<thead>
<tr>
<th>(A) Name, address, and EIN of related organization</th>
<th>(B) Primary activity</th>
<th>(C) Legal domicile (state or foreign country)</th>
<th>(D) Direct controlling entity</th>
<th>(E) Predominant income (related, investment, or unrelated)</th>
<th>(F) Share of total income</th>
<th>(G) Share of end-of-year assets</th>
<th>(H) Disproportionate allocations? Yes No</th>
<th>(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(J) General or managing partner? Yes No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV: Identification of Related Organizations Taxable as a Corporation or Trust

<table>
<thead>
<tr>
<th>(A) Name, address, and EIN of related organization</th>
<th>(B) Primary activity</th>
<th>(C) Legal domicile (state or foreign country)</th>
<th>(D) Direct controlling entity</th>
<th>(E) Type of entity (C corp, S corp, or trust)</th>
<th>(F) Share of total income</th>
<th>(G) Share of end-of-year assets</th>
<th>(H) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part V. Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV. Did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>d</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>e</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>f</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>h</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>i</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>j</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>k</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>l</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>m</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>n</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>o</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>p</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>q</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>r</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th></th>
<th>(A) Name of other organization(s)</th>
<th>(B) Transaction type (a-r)</th>
<th>(C) Amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VI  Unrelated Organizations Taxable as a Partnership

Provide the following information for each unit 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.

<table>
<thead>
<tr>
<th>(A) Name, address, and EIN of entity</th>
<th>(B) Primary activity</th>
<th>(C) Legal domicile (state or foreign country)</th>
<th>(D) Are all partners section 501(c)(3) organizations? Yes No</th>
<th>(E) Share of end-of-year assets Yes No</th>
<th>(F) Disproportionate allocations? Yes No</th>
<th>(G) Code V-LB amount in box 20 of Schedule K-1 (Form 1065) Yes No</th>
<th>(H) General or managing partner? Yes No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part II  Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print

Name of Exempt Organization
YOUTH POLICY INSTITUTE, INC.

Employer identification number
52-1278339

File by the extended due date for filing the return. See instructions.

C/O VASQUEZ & CO. 801 S. GRAND AVE., STE 400

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
LOS ANGELES, CA 90017

Check type of return to be filed (File a separate application for each return):

☐ Form 990-
☐ Form 990-EZ
☐ Form 990-T (sec. 401(a) or 408(e) trust)
☐ Form 1041-A
☐ Form 5227
☐ Form 8870
☐ Form 59-69

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

The books are in the care of

Address

Telephone No 213-688-2802

Fax No

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

If this is 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.

I request an additional 3-month extension of time until MAY 15, 2010 , and ending JUN 30, 2009.

If this tax year is for less than 12 months, check box

State in detail why you need the extension

ADDITIONAL TIME IS REQUIRED TO FILE AN ACCURATE TAX RETURN

If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits, see instructions.

If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously, with Form 5888.

Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD, or, if required, by using EFTPS (Electronic Federal Tax Payment System), see instructions.

Signature and Verification

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

Signature

Title TAX PRINCIPAL

Date 2/22/10