PUBLIC DISCLOSURE COPY **

Form **991**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury

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

Inspection

► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning and ending B Check if C Name of organization D Employer identification number Address change YOUNG AMERICA'S FOUNDATION Name change Doing business as 23-7042029 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 11480 COMMERCE PARK DR 600 703-318-9608 G Gross receipts \$ 27,687,844. City or town, state or province, country, and ZIP or foreign postal code Amended RESTON, VA 20191-1556 H(a) Is this a group return F Name and address of principal officer: RON ROBINSON for subordinates? Yes X No pendina SAME AS C ABOVE H(b) Are all subordinates included? I Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) L 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ WWW.YAF.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association Other -L Year of formation: 1969 M State of legal domicite: TN Part I Summary Briefly describe the organization's mission or most significant activities: PUBLIC EDUCATION ON THE IDEAS OF Governance INDIVIDUAL FREEDOM, A STRONG NATIONAL DEFENSE, FREE ENTERPRISE, 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 7 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 52 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 8500 6 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 5.480. b Net unrelated business taxable income from Form 990-T, line 38 Prior Year **Current Year** 21,547,511. 24,935,943. 8 Contributions and grants (Part VIII, line 1h) Revenue 758,371. 481,119. 9 Program service revenue (Part VIII, line 2g) 1,839,186. 2,722,705. 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) 168,017. 154,304. 919,352. 687,804. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 201,455. 238,580. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) Ο. 0. 5,901,515. 764,083. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 82.576. 75,470. b Total fundraising expenses (Part IX, column (0), line 25) 17,547,165. 17,644,895. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 23,732,711. 23,723,028. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,186,641. 3,964,776. 19 Revenue less expenses. Subtract line 18 from line 12 5 Beginning of Current Year End of Year 74,757,386. 20 Total assets (Part X, line 16) 75,666,510. 6,179,581 4,743,260. Total liabilities (Part X, line 26) 69.486.929. 70.014.126. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Description of preparer (other than officer) is based on all information of which preparer has any knowledge Signalare of efficer Sign STEPHEN TROTMAN. CHIEF FINANCIAL OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Paid TAMARA VINEYARD TAMARA VINEYARD 09/17/19 P01775208 self-employed Preparer Firm's name DIXON HUGHES GOODMAN LLP Firm's EIN 👞 56-0747981 Firm's address 1410 SPRING HILL ROAD, SUITE 500 Use Only TYSONS, VA 22102-3056 Phone no. (703) 970-0400

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

832001 12-31-18

Form 990 (2018) YOUNG AMERICA'S FOUNDATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	;		
	If "Yes," complete Schedule A	1	X	ļ
2	Is the organization required to complete Schedule 8, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	ĺ		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	BERGE		Julian I
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
Ť	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	116	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	H		
		12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	In the appropriation and an extend in continued 70th M42th V00th v00th	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	148		
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		446		х
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u> </u>
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	4.		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u>A</u>
10		4.0		X
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u> </u>
17		,	х	
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Α.	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I. Parts I and II	21		<u> X</u>

Fall	t 14 Offeckist of Required octredules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			1
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? f "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		18	100
	instructions for applicable filing thresholds, conditions, and exceptions):		3	77
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	727	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	-
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		\vdash
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		x	
0.4	contributions? If "Yes," complete Schedule M	30	<u> </u>	┢
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31	1	x
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	\vdash	
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	35		
J	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	一	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	-		\Box
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		S. 16	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable 164		fill	
	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			na.
	(gambling) winnings to prize winners?	1c	X	
	AND DESCRIPTION OF PROPERTY OF A STATE OF THE PROPERTY OF THE	100	, gan	100101

Form	990 (2018) YOUNG AMERICA'S FOUNDATION 23-704	2029	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	1		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	2		FILL
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	443		E
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:	_		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
_	were not tax deductible?	6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).	100		III.
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payo	r? 7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	l		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
•	to file Form 8282?	. 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	15-1	CII.	200
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			19.0
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			antis.
a	Did the sponsoring organization make any taxable distributions under section 4966?	98		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:	68.	175	
a	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	800		
	Section 501(c)(12) organizations. Enter:			
11	Gross income from members or shareholders			Y
a	a di	150	1	6
b				
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax exempt interest received or accrued during the year		120	mar
	Section 501(c)(29) qualified nonprofit health insurance issuers.			10
13	and the state of t	13a		
8	Note. See the instructions for additional information the organization must report on Schedule O.	1.00		N.
	Enter the amount of reserves the organization is required to maintain by the states in which the			
מ	organization is licensed to issue qualified health plans	1180		
_				211
		14a		X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	170		1
15		15	1	X
	excess parachute payment(s) during the year?	13		+**
40	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
16		13		1
	If "Yes," complete Form 4720, Schedule O.	F	001	1/2019

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

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or charges in schedule 6. See instructions.			[40]
_	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes_	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9	1 1		LAT
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		36	
b	Enter the number of voting members included in line 1a, above, who are independent	1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	2		х
_	officer, director, trustee, or key employee?	-		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	3		x
	of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5		6		X
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
7a	T 10	7a		x
_	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
D	persons other than the governing body?	7b		x
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			-
8		8a	X	-0-9
a b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			$\overline{}$
3	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	THIS SACTION DIRECTORS INTO MINIOUS BOUNCES NOT LEGISLAGE OF THE INCLUMENTAL PLANTAGE COOCY.		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b			JEA.	= []8
12a		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b_	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent		M	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			0,00
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	<u> </u>	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	168	1	
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	<u> </u>	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	THE		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CT, FL, IL, KS, KY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	STEPHEN TROTMAN - 703.318.9608			
	11480 COMMERCE PARK DRIVE #600, RESTON, VA 20191			was a same
RION	9 12:31:18 SEE SCHEDULE O FOR FULL LIST OF STATES	Forn	ı 990	(2018)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box if neither the organizati	OILLIOI BITA LEIBREGO	луа	11120	поп		рсп	Juli	d arry correct concer, or	rediction, or tradeco.	
(A)	(B)			_ (0				(D)	(E)	(F)
Name and Title	Average	(do		Posi heck r) N (9	Reportable	Reportable	Estimated
	hours per	bax	unles	ss per	son is	s both	an	compensation	compensation	amount of
	week		er an	9 21 41	IBCID	7 0 0 51	94)	from	from related	other
	(list any	ecto						the	organizations	compensation from the
	hours for related	or d	83			sared		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	a trus		186	mpen		(***2/1033***********************************		and related
	below	ndividual frustee or director	nstitutional trustee	tra	Key employee	Highest compensated employee	- 100			organizations
	line)	pdis	nstitt	Officer	Key e	Highe emplo	- Brower			3
(1) RONALD PEARSON	2.00									
VICE PRESIDENT/DIRECTOR		Х						0.	0.	0.
(2) JAMES B. TAYLOR	2.00	Г								
DIRECTOR		X						0.	0.	0.
(3) PETER SCHWEIZER	4.00	П								
DIRECTOR		Х						6,500.	0.	0.
(4) WYNTON C. HALL	4.00									•
DIRECTOR		X						1,000.	0.	0.
(5) T. KENNETH CRIBB	2.00									
DIRECTOR		X	L					0.	0.	0.
(6) EMILY JASHINSKY	4.00									
DIRECTOR		X						4,600.	0.	0.
(7) KATE OBENSHAIN	2.00									_
DIRECTOR		X						0.	0.	0.
(9) RON ROBINSON ESQ.	60.00									
PRESIDENT/DIRECTOR		X		Х				671,388.	0.	37,334.
(10) FRANK J. DONATELLI	2.00						1			
TREASURER		X		X				0.	0.	0.
(11) STEPHEN TROTMAN	50.00]	1							
DIRECTOR OF FINANCE		╙		Х				255,561.	0.	45,812.
(11) KIMBERLY BEGG	40.00									
VP, GENERAL COUNSEL		\perp		X				261,104.	0.	27,312.
(12) ANDREW COFFIN	60.00						1			
VICE PRESIDENT		$oxed{oxed}$		<u> </u>	X			366,91 <u>9</u> .	0.	25,962.
(13) PATRICK COYLE	50.00									
VICE PRESIDENT						X		202,000.	0.	16,712.
(14) NICOLE HOPLIN	50.00									
VICE PRESIDENT		╙	<u> </u>	_		X		245,051.	0.	32,312.
(15) JASON BARBOUR	50.00	1				1			1	
DIRECTOR OF DEVELOPMENT		\perp	_			X		274,231.	0.	24,662.
(16) DARLA ANZALONE	50.00									
DIRECTOR OF COMMUNICATION			\perp	$oxed{oxed}$		X		318,546.	0.	27,312.
(17) JESSICA JENSON	50.00									
CHIEF OF STAFF						X		151,000.	0.	31,162.

832007 12-31-18

Form **990** (2018)

Page 8

Gection A. Officers, Directors, Trus	lees, itey Lill	JIUY	cos;	anc	LIN	liids	il O	ompensated Employer	ss (continued)				
(A) Name and title	(B) (C) Average Position							(D) Reportable	(E) Reportable	(F) Estimated			ad
Name and the	hours per		not c	heck i	mor e	than o		compensation	compensation			nount	
	week			da d				from	from related			other	
	(list any	extor.						the	organization			pensa	
	hours for related	individual Involce or director	23			ated		organization	(W·2/1099·MI	SC)		om th	
	organizations	ustee	işt i		 	Suado		(W-2/1099-MISC)			_	anizat d relat	
	below	II Baut	institutional Irustee		Key employea	E 22						u relai anizati	
	hours for related organizations below line) line) hours for related organizations below line)										3		
						Γ							
			\vdash		-	┝							
		L											
			\vdash	\vdash	H	-	-						
							L						
		Γ											
							-						
		1_			<u> </u>			0.555.000			0.5	2 5	
1b Sub-total				• • • • • •				2,757,900.		0.	26	8,5	
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)							>	2,757,900.	l	0.	26	8,5	<u>0.</u> 80.
2 Total number of individuals (including but n							p-	``	,000 of reportable			- / -	
compensation from the organization												Yes	12 No
3 Did the organization list any former officer,	director, or to	ister	a ka	v en	nnlo	VAA	or l	highest compensated e	molovee on	[103	140
line 1a? If "Yes," complete Schedule J for s											3		х
4 For any individual listed on line 1a, is the su											-	NA.	100
and related organizations greater than \$150										935,23s	4	Х	9-1-(12)
5 Did any person listed on line 1a receive or a												Ri _i	
rendered to the organization? If "Yes," con-	plete Schedul	e <i>J f</i>	or st	ich i	oers	on				.com	5		X
Section B. Independent Contractors 1 Complete this table for your five highest co	mpeneated inc	iono	ndo	nt co	ontre	acto	re th	and received more than 5	100,000 of com	noneal	lion fe)ID	
the organization. Report compensation for	•									Jensai	uon m	Jill	
(A)								(B)			(0	2)	
Name and business		D 0	2.7				\dashv	Description of s			ompe	nsatio	<u>n</u>
STEPHEN CLOUSE, 43538 GOI CIRCLE, ASHBURN, VA 20147		DΟ	W				- 1	VIDEO PRODUC	TION		4.4	4 2	20
ABBSON								CONSULTING			44	4,2	<u> </u>
404 5TH AVE 3RD FLOOR, NE	W VORK	M	v	1 N	Λ1	Ω		AV - VIDEO S	TO PAMENC		12	3,7	71
ONE & ALL, 2 NORTH LAKE A	WE STR	60	0	10	OT	0	\dashv	WA - AIDEO P	DNIFMANI		42	3,/	/1.
PASADENA, CA 91101	515	00	٠,					MARKETING CO	NSIILTING		37	3,4	17.
FORWARD PUBLISHING, 15021	VENTUR	Α	BL	VD			\dashv					-, -	,,
#503, SHERMAN OAKS, CA 91		_						SPEAKERS			35	2,8	20.
LORRAINE LIM CATERING													
1401 TOWER SQUARE, VENTUE	919 59					200		CATERING SER			33	3,0	<u> 37.</u>
2 Total number of independent contractors (including but not limited to those listed above) who received more than													

13

\$100,000 of compensation from the organization

		Check if Schedule O cont	ains a response	or note to any line	in this Part VIII	(0)	400	
	Is				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इ	1 a	Federated campaigns	1a					
E 5		Membership dues	2000 2000					
S, E	C	Fundraising events						
報告		Related organizations						
S, H		Government grants (contribut	100					
ë i		All other contributions, gifts, gran						
ğä		similar amounts not included abo		24,935,943.		- A = 1 pg		
直	q	Noncash contributions included in times	1.1.1.1	601,860.				
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f			24,935,943.			
				Business Code				H-MACO
.	2 a	SPEAKER INCOME		541900	463,800.	463,800.		
Š	ь			541900	274,663.	274,663.		
Ser	c	PUBLICATION SALES		541900	19,908.	19,908.		
E S	ď							-
Program Service Revenue								
품	f	All other program service reve	TO LIE					
	a				758,371.			
	3	Investment income (including			,		····	1
İ	_	other similar amounts)			747,914.			747,914.
	4	Income from investment of tax			7.00,0000			747,744.
	5	Royalties	, ,	· -	102,293.			102,293,
	_		(i) Real	(ii) Personal		8 = EIII/C = 828		102,255.
	6 a	Gross rents	47,831.	(N) T CTSOTIAL	0			
		Less: rental expenses	0.					
		Rental income or (loss)	47,831.					
		Net rental income or (loss)			47,831.			47,831.
		Gross amount from sales of	(i) Securities	(ii) Other		Maria Maria		47,002,
		assets other than inventory	1,091,312.	(1) (1)				
	h	Less: cost or other basis	, , , , , , , , , , , , , , , , , , , ,					
	-	and sales expenses	0.	40.		His The His		
ı	G	Gain or (loss)						
		Net gain or (loss)			1,091,272.			1,091,272.
	Яа	Gross income from fundraising	n events (not					2,052,272,
venue	_	including \$						
		contributions reported on line						
Other Re		Part IV, line 18						
je l	b	Less: direct expenses	h					
ō		Net income or (loss) from fund						Data Alles
		Gross income from gaming ac	-			Centil de la		
- 1		Part IV, line 19						
	b	Less: direct expenses	b					
		Net income or (loss) from gam				Talletel (MD2+1 aut)		
		Gross sales of inventory, less						
		and allowances						
	h	Less: cost of goods sold	b					
		Net income or (loss) from sale						
ı		Miscellaneous Revenue		Business Code				
-	11 a	OTHER INCOME	<u> </u>	900099	4,180.	4,180.		
	b				7,400.	4,100.		
								-
	U A	All other revenue	UNIVERSITY OF THE SECOND					
	- 4	Total. Add lines 11a-11d			A 19A			140.00
	12	Total revenue. See instructions			4,180.	760 551	-	1 000 340
	14	Total revenue. See mistructions			27,687,804.	762,551.	0.	1,989,310.

Check if Schedule Q contains a regions or note to any kine in this Part IX	Section	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	r organizations must con	plete column (A).	
To Grants and contestic comparizations and domestic governments. See Part IV, line 2 238,580		Check if Schedule O contains a respon-	se or note to any line in t			
and domestic governments. Sae Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations. Foreign governments, and foreign individuals. See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (see offered under section 4958(P(1)) and persons described in section 4958(P(1)) and 4959(P(1)) and 49					Management and	Fundraising
2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 17 Support of the Paymont of Compensation of current officers, directors, trustees, and key employees 4 Generits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation inclinated above, to disqualified prisons described in section 4958((1)) and prisons described in section 4958((3)(8)) 7 Other employee benefits 9 Other employee benefits 1 Fees for services (non-employees) 1 Accounting 1 Lobbyring 1 Paymont transparent refers 2 Logal 1 Lobbyring 1 Professional furdinalising services. See Part IV, line 17 (Investment memagement research 196) 2 Other (Illine 11g ancount exceeds 19% of fine 25, column (A) amount, list line 11 governation technology 1 Domer, (Illine 11g ancount) and propenses on Sch. O) 3 Office expenses 1 1, 305, 968. 8 10, 588. 8 10,	1	Grants and other assistance to domestic organizations				
Individuals, See Part IV, line 12 238, 580. 238, 580. 238, 580. 3 3 3 3 3 3 3 3 3		and domestic governments. See Part IV, line 21			HEURIES HE HE	
3 Garts and other assistance to foreign originations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2	Grants and other assistance to domestic				
angement fees part VI, lines 15 and 16 (a) elements paid to or for members (compensation of current officers, directors, trustees, and key employee (a) elements and way employee (a) elements of the persons (as defined under section 495(I)(I)) and persons (described in section 495(I)(I)) and approximate and wages (a) (I) and 401(I) and			238,580.	238,580.		
Individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 1,305,968. 810,588. 356,856. 138,524.	3					
Benefits paid to or for members 1,305,968. 810,588. 356,856. 138,524.		• 10 - •				
1,305,968. 810,588. 356,856. 138,524.						
trustises, and key employees 6 Compensation not included above, to disqualified persons is a defined under section 4958()(1)) and persons described in section 4958()(1)) and 493()(1) employer contributions; (include section 401()) and 493(1) employer contributions; 468,828. 438,538. 20,230. 10,060. 10 Payroll taxes 279,857. 228,251. 36,875. 14,731. 11 Fees for services (non-employees): a Management 44,334. 44,334. 44,334. d Lobbying 44,334. 44,334. 44,334. d Lobbying 44,334. 44,334. 44,334. d Lobbying 9 Professional fundralsing services. See Part IV, lins 17 fs, 470. 94,770. 94,770. 10 Investment management fees 994,770. 94,770. 94,770. 92,770. 12 Advertising and promotion 836,184. 336,184.					- IIIII ee - IIII.A jir - III	
6 Compensation not included above, to disqualified persons (as defined under section 4958(r)(3)(8) 7 Other solaries and wages 8 Pension plan acruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 279,857, 228,251, 36,875, 14,731, 11 Fees for services (non-employees): a Management b Legal 181,020, 64,486, 105,517, 11,017, c Accounting 44,334, 44,334, 44,334, d Lobbyring Professional fundalsing services. See Part IV, line 17 f Investment management fees 0 Other (Illine 11g amount exceeds 10% of line 25, contumn (A) amount, list line 11g expenses on Sch 0, 1205,277, 872,854, 332,423. 13 Office expenses 10 Coupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20 Contents, chapter of the expenses on covered above, List miscalarous expenses in the 24e. Illine 24e amount exceeds 10% of fice 25, contunt (A) amount, list line 24e expenses on Schedule 0, a COMMUNICATION 10 b HONORARTA c HONORARTA c HONORARTA b HONORARTA c HONORARTA c HONORARTA c HONORARTA c HONORARTA b HONORARTA c	5		1 305 060	010 500	356 056	120 524
persons described in section 4986(r)(1) and persons described in section 4986(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruate and contributions (include section 4016), and 403(1) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management b Legal 181,020, 64,486, 105,517, 11,017, c Accounting d Lobbying Professional fundralsing services. See Part IV, line 17 f Investment management fees 9 Other (Iline 1) amount excess (10% of line 25, column (A) amount, list line 11g expenses on Schol.) 12 Advantising and promotion 130,710, 968,973, 98,905, 62,841, 141,107,107,107,107,107,107,107,107,107,10		Y-200	1,305,968.	810,588.	356,856.	138,524.
Parsons described in section 4958(c)(3)(8) 3,709,430. 3,234,327. 346,400. 128,703.	6	2010				
7 Other salaries and wages 8 Persion plan actrials and contributions (include section 401k) and 403(b) employer contributions 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) A Management 11 Legal 11 Legal 12 Legal 13 Legal 14 Legal 14 Legal 14 Legal 15 Legal 16 Legal 17 Life in the services (non-employees) 17 Investment management fees 18 Other, (Illin 11) amount accepts 10% of line 25, column (IA) amount, list line 11ft expenses on Schol. 19 Advertising and promotion 10 Office expenses 10 Coupancy 17 Travel 18 Payments to dravel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 20 Depreciation, depletion, and amortization 21 Legal EQUIZENTON MATERIALS/BOO et al. (Illing 24 amount list line line 25, column (IA) amount, list line 10 line 25, column (IA) amount, list line						
Pension plan accruals and contributions (include section 40 filk) and 40(b) employer contributions) Other employee benefits 468,828. 438,538. 20,230. 10,060. 10			3 700 430	2 224 227	246 400	100 700
Section 401(k) and 403(b) employer contributions 468,828.	-		3,709,430.	3,434,341.	340,400.	120,703.
9 Other employee benefits	8					
10 Payroll taxes 279,857. 228,251. 36,875. 14,731. 11 Fees for services (non-employees): a Management b. Legal 181,020. 64,486. 105,517. 11,017. 12 C. Accounting 44,334. 44,334. 44,334. 13 Lobbying 75,470. 75,470. 75,470. 14 Professional fundalising services. See Part IV, line 17 75,470. 94,770. 15 Other (II line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 14 Advertising and promotion 836,184. 836,184. 836,184. 15 Office expenses 272,934. 219,169. 11,665. 42,100. 16 Information technology 1,205,277. 872,854. 332,423. 17 Travel 1,206,683. 1,231,747. 34,936. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,756,108. 2,708,763. 477,345. 16 Conferences, conventions, and meetings 1,490,309. 1,213,112. 198,211. 78,986. 18 Payments to affiliates 2,756,108. 2,708,763. 477,345. 18 Payments to affiliates 2,756,108. 2,708,763. 477,345. 19 Conferences 2,756,108. 2,708,763. 477,345. 10 Insurance 1,490,309. 1,213,112. 198,211. 78,986. 10 Insurance 1,57,468. 1,060. 156,408. 10 Honoraria 2,800,000. 2,200,000. 20 Columinal exceeds 10% of line 25, column (A) amount, its line 24e expenses on Schedule 0.) 20 Columinal exceeds 10% of line 25, column (A) amount, its line 24e expenses on Schedule 0.) 20 Columinal exceeds 10% of line 25, column (A) amount, its line 24e expenses on Schedule 0.) 20 Columinal exceeds 10% of line 25, column (A) amount, its line 24e expenses on Schedule 0.) 20 Columinal exceeds 10% of line 25, column (A) amount, its line 24e expenses on Schedule 0.) 20 Columinal exceeds 10% of line 25, column (A) amount, its line 24e, expenses on Schedule 0.) 20 Columinal exceeds 10% of line 25, column (A) amount, list line 24e, expenses on Schedule 0.) 20 Columinal excee			460 000	420 E20	20 220	10 060
11 Fees for services (non-employees): a Management b Legal	_					
Management	-		213,031.	440,451.	30,013.	14,/31.
Description Section						
C Accounting A44,334.			191 020	54 485	105 517	11 017
d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (II line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion Advertising and promotion Cocupancy Interest Cocupancy Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Depreciation, depletion, and amortization Insurace Other expenses Indicates expenses not covered above. (List miscellaneous expenses in the 24e. If line 24e amount, list line 24e expenses on Schedule O.) EQUITAMENT & MAINTENANCE of Equitament (B) kint costs from a combined educational campaign and fundraising soficitation.				04,400.		11,01/*
e Professional fundralsing services. See Part IV, line 17 f Investment management fees g Other. (Illine 11g annual exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 2 Advertising and promotion 3 Office expenses 3 Column (A) amount, list line 11g expenses on Sch O.) 4 Information technology 5 Royalties 6 Occupancy 7 794, 574. 7 Travel 7 Travel 7 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 10 Interest 10 Depreciation, depletion, and amortization 11 Insurance 11 Insurance 12 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule O.) 1 COMMUNICATION 1 HONORARIA 1 CEQUIPMENT & MAINTENANCE 2 EQUIPMENT & MAINTENANCE 3 EDUCATION MATERIALS/BOO 2 All other expenses. 2 Total functional expenses. Add lines 1 through 24e 2 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campalga and fundraising solicitation.			44,234.		44,334.	
Formation Investment management fees 94,770. 94,770. 94,770.			75 470	• *		75 470
g Other. (II line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion 366,184. 366,184. 372,934. 219,169. 11,665. 42,100. 14 Information technology 1,205,277. 872,854. 332,423. 15 Royalties 16 Occupancy 794,574. 1,266,683. 1,231,747. 17 Travel 1,266,683. 1,231,747. 1,266,683. 1,216,883. 1,216,		112 113 113 113	94 770		94 770	75,470+
Column (A) amount, list line 11g expenses on Sch 0.) 1,130,719. 968,973. 98,905. 62,841.			32,770.		32,1100	
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13 Office expenses 272,934. 219,169. 11,665. 42,100. 14 Information technology 1,205,277. 872,854. 332,423. 15 Royalties 794,574. 511,603. 250,291. 32,680. 17 Travel 1,266,683. 1,231,747. 34,936. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 1,266,683. 2,708,763. 47,345. 10 Interest 8,290. 8,290. 10 Payments to affiliates 2,756,108. 2,708,763. 47,345. 10 Interest 8,290. 8,290. 10 Payments to affiliates 2,756,108. 2,708,763. 47,345. 10 Interest 8,290. 8,290. 10 Interest 1,490,309. 1,213,112. 198,211. 78,986. 10 Interest 1,490,309. 1,213,112. 198,211. 78,986. 157,468. 1,060. 156,408. 157,468. 1,060. 156,408. 157,468. 1,639,581. 1,638,581. 1,000. 2 COMMUNICATION 4,392,615. 3,483,932. 92,570. 816,113. 16 GOUTPMENT & MAINTENANCE 392,150. 242,892. 149,258. 2 EQUIPMENT & MAINTENANCE 392,150. 242,892. 149,258. 2 EDUCATION MATERIALS/BOO 207,245. 179,031. 28,214. 2 All other expenses 1 through 24e 23,723,028. 19,443,884. 2,772,956. 1,506,188. 2 Solit costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	12	THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN TO SE			30,3000	32,0220
1, 205,277. 872,854. 332,423.			272.934.	219.169.	11.665.	42.100.
15						
16 Occupancy 794,574 511,603 250,291 32,680 17 Travel 1,266,683 1,231,747 34,936 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 2,756,108 2,708,763 47,345 10 Interest 8,290 8,290 11 Payments to affiliates 8,290 1,213,112 198,211 78,986 12 Depreciation, depletion, and amortization 1,490,309 1,213,112 198,211 78,986 157,468 1,060 156,408 157,468 1,060 156,4					,	
1, 266, 683.			794,574.	511,603.	250,291.	32,680.
18			1,266,683.	1,231,747.	34,936.	
for any federal, state, or local public officials 19			<u>-</u>			
19 Conferences, conventions, and meetings 2,756,108. 2,708,763. 47,345.		·				
Payments to affiliates Payments to affiliate Pay	19		2,756,108.	2,708,763.	47,345.	
Payments to affiliates Depreciation, depletion, and amortization 1,490,309. 1,213,112. 198,211. 78,986.						
Depreciation, depletion, and amortization 1,490,309. 1,213,112. 198,211. 78,986.	21					
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a COMMUNICATION b HONORARIA c EQUIPMENT & MAINTENANCE d EDUCATION MATERIALS/BOO e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	22					78,986.
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a COMMUNICATION b HONORARIA c EQUIPMENT & MAINTENANCE d EDUCATION MATERIALS/BOO e All other expenses 774,634. 321,213. 358,458. 94,963. 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	23	Insurance	157,468.	1,060.	156,408.	
a COMMUNICATION 4,392,615. 3,483,932. 92,570. 816,113. b HONORARIA 1,639,581. 1,638,581. 1,000. c EQUIPMENT & MAINTENANCE 392,150. 242,892. 149,258. d EDUCATION MATERIALS/BOO 207,245. 179,031. 28,214. e All other expenses 774,634. 321,213. 358,458. 94,963. 25 Total functional expenses. Add lines 1 through 24e 23,723,028. 19,443,884. 2,772,956. 1,506,188. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
HONORARIA	я		4,392,615.	3,483,932.	92,570.	816,113.
EQUIPMENT & MAINTENANCE 392,150. 242,892. 149,258.						<u> </u>
EDUCATION MATERIALS/BOO 207,245. 179,031. 28,214.	_					
e All other expenses 774,634. 321,213. 358,458. 94,963. 25 Total functional expenses. Add lines 1 through 24e 23,723,028. 19,443,884. 2,772,956. 1,506,188. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					- · · · · · · · · · · · · · · · · · · ·	
Total functional expenses. Add lines 1 through 24e 23,723,028. 19,443,884. 2,772,956. 1,506,188. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						94,963.
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation,			. ,		. ,	
educational campaign and fundraising solicitation.		,				
		, , , ,				
			4,479,140.	3,420,794.	0.	1,058,346.

² ar	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	and the same of th		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,204,320.	1	1,778,481.
	2	Savings and temporary cash investments	44	2	1,553,443.
	3	Pledges and grants receivable, net		3	13,871,730.
- 1	4	Accounts receivable, net	C10 740	4	383,611.
- 1	5	Loans and other receivables from current and former officers, directors,		UE.	
	_	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under		500	
1		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
,		employees' beneficiary organizations (see instr). Complete Part II of Sch L	17.	6	
Assets	7	Notes and loans receivable, net		7	
Asi	8	Inventories for sale or use		8	· · · · · · · · · · · · · · · · · · ·
	9	Prepaid expenses and deferred charges		9	397,251.
	_	Land, buildings, and equipment: cost or other		15-1	
		basis. Complete Part VI of Schedule D 10a 40,913,27	6.		
	h	Less: accumulated depreciation 10b 12,766,37	2. 26,770,904.	10c	28,146,904.
	11	Investments - publicly traded securities	23,698,586.	11	25,263,192.
	12	Investments - other securities. See Part IV, line 11		12	476,520.
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets	1.07	14	
İ	15	Other assets. See Part IV, line 11		15	2,886,254
	16	Total assets. Add lines 1 through 15 (must equal line 34)	***	16	74,757,386
	17	Accounts payable and accrued expenses	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	17	1,102,259
	18	Grants payable		18	
	19	Deferred revenue		19	1,998.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	300	21	
	22	Loans and other payables to current and former officers, directors, trustees,		riyinto	
ties	_	key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	W. Rant-Middle
	23	Secured mortgages and notes payable to unrelated third parties	0 000 000	23	1,000,000.
	24	Unsecured notes and loans payable to unrelated third parties	2.22	24	
	25	Other liabilities (including federal income tax, payables to related third			·
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	2,871,626.	25	2,639,003.
	26	Total liabilities. Add lines 17 through 25	6,179,581.	26	4,743,260.
		Organizations that follow SFAS 117 (ASC 958), check here X ar	d and a second	JHO	
ın	1	complete lines 27 through 29, and lines 33 and 34.			
Ce	27	Unrestricted net assets	37,632,216.	27	32,896,065
alar	28	Temporarily restricted net assets	12,009,489.	28	12,267,000.
ä	29	Permanently restricted net assets	19,845,224.	29	24,851,061.
Ē	1	Organizations that do not follow SFAS 117 (ASC 958), check here		1311111	
ř		and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds	88	30	
Assets	31	Paid in or capital surplus, or land, building, or equipment fund		31	
		Retained earnings, endowment, accumulated income, or other funds		32	
t Ass	32				
Net Assets or Fund Balances	33	Total net assets or fund balances	69,486,929. 75,666,510.		70,014,126.

Form 990 (2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of	lame of the organization Employer identification number										
	YOUN	G AMERICA'	S FOUNDATION				2	3-7042029			
Part I	Reason for Public (Charity Status (All organizations must co	mplete th	is part.) Se	e instructions	S.				
The organ	nization is not a private found										
1 🗀	A church, convention of chi					D(A)(i).					
2 🔲	A school described in secti										
з 🔲	A hospital or a cooperative					m.					
4 🗔	A medical research organiza	_				•	Viii) Enter	the hospital's name			
• —	city, and state:		· jananan viiii a maapiiai	4000	300110	ar it olok ikz	Manh. mirror	and moophed o marrie,			
5 🗔	An organization operated for	or the benefit of a col	llege or university gwned	or operat	ad by a go	warnmantalu	nit decerib	ad in			
9	section 170(b)(1)(A)(iv). (C		nege of differency owned	or operat	ed by a go	verimental u	IIII describi				
6 🔲			المنا المسائد والمسائد والمسائد		70(L.W.4W.4.)	6.3					
	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
7 41			ntial part of its support if	om a gove	mmentai	unit or from tr	ie generai	public described in			
• 🗀	section 170(b)(1)(A)(vi). (C										
8 🖳	A community trust describe										
9 🔛	An agricultural research org										
	or university or a non-land-g	frant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or			
—	university:										
10	An organization that normal										
	activities related to its exem										
	income and unrelated busing		(less section 511 tax) fro	m busines	sses acqui	red by the org	janization a	after June 30, 1975.			
	See section 509(a)(2). (Cor	mplete Part III.)									
11 ∐	An organization organized a	•	*	-		, .					
12	An organization organized a						-				
	more publicly supported org	ganizations describe	d in section 509(a)(1) o	r section :	509(a)(2).	See section :	509(a)(3). (Check the box in			
	_lines 12a through 12d that of	describes the type o	f supporting organization	and com	plete lines	12e, 12f, and	l 12g.				
a	Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving			
	the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	pporting			
	organization. You must o	complete Part IV, Se	ections A and B.								
ь 🗀	Type II. A supporting org	anization supervised	or controlled in connect	ion with it:	s supporte	ed organizatio	n(s), by hav	/ing			
	control or management o					_		_			
	organization(s). You mus			·							
c	Type III functionally inte			in connect	tion with, a	and functional	lv integrate	ed with.			
	its supported organization						,	,			
d [Type III non-functionally		•			•	ted organi:	zation(s)			
	that is not functionally int						_				
	requirement (see instructi					-	i an attenti	VC11033			
e \square	Check this box if the orga		*				II. Tupo III.				
•	functionally integrated, or					Type I, Type	п, туре п				
& Ent	er the number of supported o		, , , , , , , , , , , , , , , , , , , ,	•							
		_	al a constant and a								
	vide the following information (i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the orga	ing document?	(v) Amount of	f monetary	(vi) Amount of other			
	organization	\.,, =	(described on lines 1-10			support (see in	-	support (see Instructions)			
			above (see instructions))	Yes	No	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	,			
						<u></u>					

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(Б) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and			1	(4)	(0, 2010	(1) 19131
	membership fees received. (Do not						
		20699924.	34673656.	21439940.	21547511.	24935943.	123296974
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to				1		
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to	1				i	
	the organization without charge	1					
4	Total. Add lines 1 through 3	20699924.	34673656.	21439940.	21547511.	24935943.	123296974
	The portion of total contributions						
	by each person (other than a	KIND BY	ALBEIT HIS				
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						15649220.
6	Public support. Subtract line 5 from line 4.	(Virgillanda)	CHECK TO THE	HEST CONTINUES.	A SHIP OF SHIP		107647754
	ction B. Total Support						10/01//31
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
		20699924.		21439940.	21547511.	24935943.	123296974
	Gross income from interest.						2000303.1
_	dividends, payments received on						
	securities loans, rents, royalties,				ļ		
	and income from similar sources	856,277.	743,960.	860.455.	909,592.	898,038.	4268322.
9	Net income from unrelated business		_ , ,	-	700,000	050,0501	12003221
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	13,835.	488.	80,070.	4,445.	4 180.	103,018.
11	Total support. Add lines 7 through 10			3 3 3 3 3			127668314
12		etc. (see instruction	ons)				,909,593.
	First five years. If the Form 990 is for			d fourth or fifth ta	y vear as a section		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	organization, check this box and stor	here					
Sec	ction C. Computation of Publi	c Support Per	centage			mining the management of	
$\overline{}$	Public support percentage for 2018 (I			olumn (f))	Section of the Contract Contra	14	84.32 %
15	Public support percentage from 2017	Schedule A. Part	II. line 14			15	81.37 %
16a	33 1/3% support test - 2018. If the	prognization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m		
	stop here. The organization qualifies						
b	33 1/3% support test - 2017. If the	organization did no	t check a box on !	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s hox
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ntion		or more, onean in	>
17a	10% -facts-and-circumstances test	- 2018. If the org	anization did not o	heck a box on line	13 16a or 16b a	nd line 14 is 10%	or more
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a	sublicly supported	organization	C FERIOW IN OUGAIN	Lation
h	10% -facts-and-circumstances test	= 2017. If the ora	anization did not a	hack a hay on line	13 16s 16h s-1	70. and line 15 in 1	10% or
-	more, and if the organization meets the						
	organization meets the "facts and circ						
18	Private foundation. If the organization						
		ald not offect a l	SOA OIT HITE TO, TO	a, 100, 17d, 0f 170	, oneth this box al		000 571 0040

Schedule A (Form 990 or 990-EZ) 2018

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support		0.000				55
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusua! grants.")						
2	Gross receipts from admissions,			<u> </u>			
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
-	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	iness under section 513						
	P-1-4 (P44 + 3/8) - 1				-		
4	Tax revenues levied for the organ-			}			
	ization's benefit and either paid to	;					
	or expended on its behalf					<u> </u>	
5	The value of services or facilities						
	furnished by a governmental unit to						Ï
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						1
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	ı					
	amount on line 13 for the year	ı	1				
6	Add lines 7a and 7b					i	
	Public support. (Subtract line 7c from line §1			III WATERING			
	tion B. Total Support		'				<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6		1 (3)	1	1 1 1	1 1	
	Gross income from interest,			İ			
	dividends, payments received on		ļ				
	securities loans, rents, royalties, and income from similar sources		i	1			
-	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 20, 1075		1				
	Add lines 10a and 10b						_
11	Net income from unrelated business activities not included in line 10b.				1		
	whether or not the business is				1		
	regularly carried on				ļ		
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)		(C				
14	First five years. If the Form 990 is for	the organization:	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here		(***** <u>*******************************</u>				
Se	ction C. Computation of Publi	c Support Per	rcentage				CONTRACTOR PROPERTY
15	Public support percentage for 2018 (I	ine 8, column (f), c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2017	Schedule A, Part	III. line 15			16	%
Se	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20)18 (line 10c, colu	mn (f), divided by !	ine 13, column (f))		17	%
18			10 . 30			18	%
	33 1/3% support tests - 2018. If the						
	more than 33 1/3%, check this box ar	-					▶□
	33 1/3% support tests - 2017. If the	-	=	200	· -		and
	* *	•					N
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	и ою пот спеск а	DOX OF INE 14, 19	a, or 190, check to	ilis dox and see in:	SUUCTIONS	000 F71 6040

Yes No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	91	#1
1		
	100	
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2		
STORY.		
3a	= 0	1000041
		10164
3b		
FA		BOA
3c	_	14 miles
4a		1,44
-44	BAG	Abe
4b		
	Time:	28
4c		peller -
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5b	-	
5c		
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1176		
10a_	<u></u>	
	The second	100
10b 990 or 9		

Schedule A (Form 990 or 990-EZ) 2018

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2018

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of	the organization			Employer identification number
	JOY	UNG	AMERICA'S FOUNDATION	23-7042029
Organiza	ation type (check on	ne):		
Filers of:	:	Secti	ion:	
Form 990	or 990-EZ	X	501(c)(3) (enter number) organization	
			4947(a)(1) nonexempt charitable trust not treated as a private foundation	
			527 political organization	
Form 990).PF		501(c)(3) exempt private foundation	
			4947(a)(1) nonexempt charitable trust treated as a private foundation	
			501(c)(3) taxable private foundation	
			ed by the General Rule or a Special Rule. or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
General I	Rule			
			Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling intributor. Complete Parts I and II. See instructions for determining a contributor's	
Special F	Rules			
	sections 509(a)(1) ar any one contributor,	nd 170 , durin	ibed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to D(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount Complete Parts I and II.	or 16b, and that received from
	year, total contributi	ions o	ibed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a f more than \$1,000 exclusively for religious, charitable, scientific, literary, or education or animals. Complete Parts I (entering "N/A" in column (b) instead of the co	ational purposes, or for the
	year, contributions e is checked, enter he purpose. Don't com	exclus ere the plete :	ibed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ively for religious, charitable, etc., purposes, but no such contributions totaled monototal contributions that were received during the year for an exclusively religious any of the parts unless the General Rule applies to this organization because it recontributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., ecsived nonexclusively
but it mu	st answer "No" on F	art IV	covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo , line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo , requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

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

Name of organization Employer identification number

YOUNG	AMERICA'S FOUNDATION	43	-/042029
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$601,860.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$398,669.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

VOING AMERICA'S FOINDATTON

DUNG	AMERICA'S FOUNDATION	23	-7042029
art li	Noncash Property (see instructions). Use duplicate copies of Part I	I if additional space is needed.	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
rom	Description of noncash property given	(See instructions.)	Date received
art I			
2	PRESIDENT REAGAN MEMORABILIA AND MUSEUM COLLECTION	 	
3	ARTIFACTS	_ 	
	- <u> </u>	- 601 960	07/02/10
		\$601,860.	07/03/18
(a)			
No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
art I		(See instructions.)	
		_	
—		-	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
anti			
		-	
		—	
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
ranti			
		-	
		-	
		_ \$	
fest			
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	professional property given	(See instructions.)	
		_	
		_	
		—	
		_ [\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions.)	
		_	
		_	
		 \$	
453 11 0	9.18		990, 990-EZ, or 990-PF) (2

Name of O	rganization			Employer Identification number
	AMERICA'S FOUNDATION			23-7042029
Part III	Exclusively religious, charitable, etc., contribution any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional statements.	through (e) and the following line entry. I charitable, etc., contributions of \$1,000 or less	For organizations	
(a) No.	Ose duplicate copies of Fart III II additionals	space is needed.	1	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trac	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
				-
		(a) Transfer of eith		
		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
i				
ŀ		(e) Transfer of gift		
	Transferee's name, address, ar		Relationship of tran	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
			_	
			_	
		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trai	nsferor to transferee

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

2018
Open to Public Inspection

Department of the Treasury Informat Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations; Complete Parts I-A and C below, Do not complete Part I-B,
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B, Do not complete Part II-A,

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• :	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
	ne of organization			Emple	oyer identification number
	YOUNG A	MERICA'S FOUNDAT:	ION		23-7042029
Pa	rt I-A Complete if the org	panization is exempt unde	er section 501(c)	or is a section 527 org	janization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures			
Pa	rt I-B Complete if the ord	ganization is exempt und	er section 501(c)(3).	
1					
	Enter the amount of any excise tax				
3 4a b	If the organization incurred a section was a correction made?	on 4955 tax, did it file Form 4720	for this year?		Yes No
1	Enter the amount directly expende	d by the filing organization for se	ction 527 exempt func	tion activities S	
	Enter the amount of the filing organ				
	exempt function activities			> \$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	nd on Form 1120-POL	÷	
	line 17b			> \$	
4	Did the filing organization file Form				
5	Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC). If	ation listed, enter the amount pair romptly and directly delivered to	d from the filing organi a separate political org	zation's funds. Also enter the anization, such as a separate	amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018	YOUNG AMER	ICA'S FOUNDA	TION	23-7	042029 Page 2
Part II-A Complete if the or section 501(h)).	ganization is exe	empt under sectior	1 501(c)(3) and file	ed Form 5768 (ele	ction under
A Check if the filing organizexpenses, and sha	are of excess lobbyin	ifiliated group (and list in g expenditures). and "limited control" pro		group member's name	e, address, EIN,
Lin	nits on Lobbying Exp		=	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf b Total lobbying expenditures to inf	fluence a legislative b	ody (direct lobbying)		0.	
c Total lobbying expenditures (add d Other exempt purpose expenditu	res			23,723,028.	
	Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns.			23,723,028. 1,000,000.	
If the amount on line 1e, column (a) Not over \$500,000		obbying nontaxable am of the amount on line 1e.			
Over \$500,000 but not over \$1,000,000 but not over \$1,		000 plus 15% of the exc 000 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,000		.000 plus 5% of the exce 10,000.	ss over \$1,500,000.		
g Grassroots nontaxable amount (e	•			250,000.	
i Subtract line 1f from line 1c. If zei	ero on either line 1h	or line 1i, did the organiza	ation file Form 4720	0.	
reporting section 4911 tax for this	4-Year A	Averaging Period Under 501(h) election do not arate instructions for lin	have to complete all	of the five columns be	Yes No
	Lobbying Exp	penditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(ь) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	1,000,000	. 1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures					
d Grassroots nontaxable amount	250,000	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
	1		I .	1	1

Schedule C (Form 990 or 990-EZ) 2018

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018 YOUNG AMERICA'S FOUNDATION 23-70420
Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i	Yes	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
d Mallings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
i Other activities? j Total. Add lines 1c through 1i				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	The Market			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), or sec	tion	
33.(3)(3)			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			163	140
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Did the organization make only inhouse lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the			\longrightarrow	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."			II-A, line	3, is
Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	al			
a Current year		2a		
b Carryover from last year				
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexient of expenditure next year?	litical	4		
5 Taxable amount of lobbying and political expenditures (see instructions)	***********	5		
Part IV Supplemental Information	emiliani (Company)	1 3		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

2018
Open to Public Inspection

Name of the organization **Employer identification number** YOUNG AMERICA'S FOUNDATION 23-7042029 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of \neg_{No} violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1

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

Schedule D (Form 990) 2018

b Assets included in Form 990, Part X

Schedule D (Form 990) 2018

1.874.536.

1,930,542.

28,146,904.

b Buildings

d Equipment

2,173,601.

4,292,894.

299,065.

2,362,352

c Leasehold improvements

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.)

Schedule D (Form 990) 2018 YOUNG AMERICA	'S FOUNDATIO	N	23-7042029 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" on	Form 990, Part IV, line 1	1b. See Form 990, Part X, lie	ne 12.
(a) Description of security or category (including name of security)	(b) Book value		Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			<u> </u>
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
	E 000 B- B E	14 - O - E - 000 B - 1 V E	- 40
Complete if the organization answered "Yes" on (a) Description of investment	(b) Book value		ne 13. : Cost or end-of-year market value
· · · · · · · · · · · · · · · · · · ·	(D) BOOK VAIDE	(C) Method of Valuation.	Cost of end-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)		*	
(6)			
(7)			
(8)			
(9)			
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" on		11d. See Form 990, Part X, li	
(a) De	scription	<u> </u>	(b) Book value
		<u>.</u>	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X col. (B) line 1: Part X Other Liabilities.	5)		>
Complete if the organization answered "Yes" on	Form 990, Part IV, line	11e or 11f. See Form 990, Pa	art X, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes	-		
(2) GIFT ANNUITIES PAYABLE		845,670.	
(3) DEFERRED RENT		787,093.	
(4) DEFERRED COMPENSATION PLANS	,	1.006.240.	

(1) Federal income taxes
(2) GIFT ANNUITIES PAYABLE
(3) DEFERRED RENT
(4) DEFERRED COMPENSATION PLANS
(5)
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2,639,003.

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

Schedule D (Form 990) 2018

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3)

Schedule D (Form 990) 2018

832054 10-29-18

SCHEDULE G

Department of the Treatury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

	o to www.irs.gov/Form990 for instr	uction	s and	the latest informati	on.	Inspection
Name of the organization	MERICA'S FOUNDATIO	NT		1 10 10 10 10 10 10 10 10 10 10 10 10 10	23-7042	ntification number
	Complete if the organization answer		oc" or	Form 990 Port IV I		
required to complete this par	t.	ned 1	es u	1 FOIIII 990, Pait IV, I		mers are not
Indicate whether the organization rais X Mail solicitations X Internet and email solicitations Phone solicitations In-person solicitations	e X Solicita	tion of tion of	non-g gover	overnment grants nment grants		
2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the	art VII) or entity in connection with p viduals or entities (fundraisers) pursu	rofessi	onal fu	undraising services?	X Yes	
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	(iii) fundr have or or con contribu	tral of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
ONE & ALL (FORMERLY RUSS	~	Yes	No			
REID) - 2 NORTH LAKE AVENUE	MARKETING CONSULTING		X	2,403,137.	373,417.	2,029,720.
HSP DIRECT - 20130 LAKEVIEW CTR, ASHBURN, VA 20147	MARKETING CONSULTING		x	871,776.	91,029.	780,747.
EBERLE ASSOCIATES - 1420 SPRING HILL ROAD, MCLEAN, VA	MARKETING CONSULTING		ж	102,637.	51,465.	51,172.
			<u> </u>	3,377,550.	515,911.	2,861,639.
List all states in which the organization or licensing.						
AL, AK, AR, CA, CT, FL, IL, WA, WV, WI	KS, KY, MD, ME, MA, MI, I	MS, N	IJ , I	IY, NC, OK, OH	OR, PA, RI,	SC, TN, VA
MA, NV, MI						
					_	-

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2018

Pa			organization answer	ed "Yes" on Form 990, Part	IV, line 18, or reported	-7042029 Page 2
		of fundraising event contributions and gro	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
a			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
	2	Less: Contributions				
_	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Sct Ex	7	Food and beverages		2,		
اقّ	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary, Add lines 4 through				
Pa	10 11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin	e 3, column (d)			
	10 11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin	e 3, column (d)			
Pa	10 11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from line II Gaming. Complete if the organization a	e 3, column (d)			(d) Total gaming (add col. (a) through col. (c)
	10 11	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from line II Gaming. Complete if the organization a	e 3. column (d) nswered "Yes" on Fol	rm 990, Part IV, line 19, or r	eported more than	
Pevenue B	10 11 rt l	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin Gaming. Complete if the organization a \$15,000 on Form 990 EZ, line 6a.	e 3. column (d) nswered "Yes" on Fol	rm 990, Part IV, line 19, or r	eported more than	
Pevenue B	10 11 rt l	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin II Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a. Gross revenue	e 3. column (d) nswered "Yes" on Fol	rm 990, Part IV, line 19, or r	eported more than	
t Expenses Revenue a	10 11 rt l	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin II Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	e 3. column (d) nswered "Yes" on Fol	rm 990, Part IV, line 19, or r	eported more than	
Pevenue B	10 11 rt I 2 3	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin II Gaming. Complete if the organization a \$15,000 on Form 990 EZ, line 6a. Gross revenue Cash prizes Noncash prizes	e 3. column (d) nswered "Yes" on Foi (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	eported more than	
t Expenses Revenue a	10 11 11 1 2 3 4 5	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin II Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	e 3. column (d) nswered "Yes" on Foi (a) Bingo	rm 990, Part IV, line 19, or r	eported more than	col. (a) through col. (c)
t Expenses Revenue a	10 11 11 1 2 3 4 5	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin Gaming. Complete if the organization a \$15,000 on Form 990 EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	e 3. column (d) nswered "Yes" on For (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo Yes%	eported more than (c) Other gaming Yes% No	col. (a) through col. (c)
t Expenses Revenue a	10 11 rt i 1 2 3 4 5	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin Gaming. Complete if the organization a \$15,000 on Form 990 EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	e 3. column (d) nswered "Yes" on For (a) Bingo Yes No 5 in column (d)	(b) Pull tabs/instant bingo/progressive bingo Yes% No	eported more than (c) Other gaming Yes% No	col. (a) through col. (c)
© Direct Expenses Revenue B	10 11 11 1 2 3 4 5 6 7 8	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from lin Garning. Complete if the organization a \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes9 No from line 1, column (d)	(b) Pull tabs/instant bingo/progressive bingo Yes% No	eported more than (c) Other gaming Yes% No	col. (a) through col. (c)

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain: __

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990 EZ) 2018 YOUNG AMERICA'S FOUNDATION	23-7042029 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a %
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and recor	
Name	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives garning revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the am	ount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name	
Address >	
16 Gaming manager information:	
Name	
Gaming manager compensation > \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the
organization's own exempt activities during the tax year 🕨 \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v.); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRA	ISERS:
(I) NAME OF FUNDRAISER: ONE & ALL (FORMERLY RUSS REID)	
(I) ADDRESS OF FUNDRAISER:	
0 MODELL LAND MINISTER CHIEF CHIEF CO C	
2 NORTH LAKE AVENUE SUITE SUITE 600, PASADENA, CA 91101	
(I) NAME OF FUNDRAISER: EBERLE ASSOCIATES	
(I) ADDRESS OF FUNDRAISER: 1420 SPRING HILL ROAD, MCLEAN, VA	22102

832083 10-03-18

Schedule G (Form 990 or 990 EZ) YOUNG AMERICA'S FOUNDATION 23-7042029 Page 4
SCHEDULE G PART I
THE FOUNDATION PAYS EACH ENTITY LISTED FOR MARKETING CONSULTING
SERVICES PERFORMED IN ACCORDANCE WITH AGREEMENTS. OTHER EXPENSES SUCH
AS PRINTING, PAPER, ENVELOPES, POSTAGE, ETC, ARE INCURRED AND GENERALLY
BILLED TO THE FOUNDATION DIRECTLY BY THE VARIOUS VENDORS. THE
FOUNDATION PAYS ONE & ALL FOR OTHER EXPENSES INCURRED DIRECTLY, WHICH
TOTALED \$2,403,137

SCHEDULE

Department of the Treasury Internal Revenue Service (Form 990)

Name of the organization

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

Open to Public OMB No 1545-0047

Employer identification number

Inspection

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

<u>2</u> 23-7042029 (h) Purpose of grant or assistance X Xes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 3 Enter total number of other organizations listed in the line 1 table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. YOUNG AMERICA'S FOUNDATION General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Part Part II

38

Schedule I (Form 990) (2018)

YOUNG AMERICA'S FOUNDATION

Page 2

23-7042029

Schedule I (Form 990) (2018)

YOUNG AMERICA'S FOUNDATION

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

Part III can be duplicated if additional space is needed.

AMERITES Supplemental information, Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. CORDAM ASSOCIATED WITH THE INTERNSHIPS IS CONDUCTED IN THE UNITED AND THESE ACTIVITIES ARE MONITORED BY FOUNDATION STAFF.	(a) Type of grant or assistance (b)	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(book, FMV, appraisal, other)	(f) Description of noncash assistance
TED WITH THE INTERNSHIPS IS CONDUCTED IN THE UNITED TIVITIES ARE MONITORED BY FOUNDATION STAFF.		11	35,460.		PMV	
TIVITIES ARE MONITORED BY FOUNDATION STAFF.		r.	203,120.	*0	лиа	
TIVITIES ARE MONITORED BY FOUNDATION STAFF.						
on. Provide the information required in Part I, line 2; Part III, column (b): and any other additional information. TED WITH THE INTERNSHIPS IS CONDUCTED IN THE UNITED TIVITIES ARE MONITORED BY FOUNDATION STAFF.	5					
no. Provide the information required in Part I, line 2; Part III, column (b): and any other additional information. TED WITH THE INTERNSHIPS IS CONDUCTED IN THE UNITED TIVITIES ARE MONITORED BY FOUNDATION STAFF.						.15
THE INTERNSHIPS IS CONDUCTED IN ARE MONITORED BY FOUNDATION STAF	n. Provide the information require	ed in Part I, line	2; Part III, column	(b); and any other ad	ditional information.	
THE INTERNSHIPS IS CONDUCTED IN ARE MONITORED BY FOUNDATION STAF						
ARE MONITORED BY FOUNDATION	PROGRAM ASSOCIATED WITH THE INTER	RNSHIPS	IS	IN	UNITED	
	ARE MONI		Y_FOUNDATI			

Schedule I (Form 990) (2018)

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SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

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

OMB No 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

YOUNG AMERICA'S FOUNDATION

Employer identification number 23-7042029

Pa	art I Questions Regarding Compensation		_	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef)			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
ь 2	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	1b	x	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			v
ᆲ	Receive a severance payment or change-of-control payment?	4a		X
0	Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement?	4b	 -	X
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		Λ
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.	333		- 719
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:		THAT	-
a	The organization?	6a		X
D	Any related organization?	6b	-	X
7	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			v
8	not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	7		X
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	8		
-	Regulations section 53.4958-6(c)?	9		
	Sov Banamusk Badusting Ask Nation and the landwatings for Form 200	, ,,,		

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

Schedule J (Form 990) 2018

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

YOUNG AMERICA'S FOUNDATION

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section 12, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of V	W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(0-(D)	in column (B) reported as deferred on prior Form 990
(1) RON ROBINSON ESQ.	8	646,388.	25,000.	0	18,000.	19,334.	708,722.	0.
PRESIDENT/DIRECTOR	E		0	0.	0	0	0	0.
(2) STEPHEN TROTMAN	Ξ	245,149.	10,412.	0.	18,500.	27,312.	301,373.	0.
DIRECTOR OF FINANCE	0		0.1	0.	0.	0.	0.1	0.
(3) KIMBERLY BEGG	ε	250,527.	10,577.	0.1	0.	27,312.	288,416.	0 •
VP, GENERAL COUNSEL	Ξ			0.	0.	0 •	0.1	.0
(4) ANDREW COFFIN	Ξ	340,765.	26,154.	0.	0.0	25,962.	392,881.	0
VICE PRESIDENT	13		0	0.	0.0	0.	0	0
(5) PATRICK COYLE	Ξ	194,538.	7,462.	0.	• 0	16,712.	218,712.	0
VICE PRESIDENT	3	0.		0	0.	0	0	0
(6) NICOLE HOPLIN	Ξ	219,564.	25,487.	0 • 1	0.0	32,312.	277,363.	0
VICE PRESIDENT	Ξ	0.	0 .	0	0.	0	0	0
(7) JASON BARBOUR	Ξ	264,231.	10,000.	0	0	24,662.	298,893.	0
DIRECTOR OF DEVELOPMENT	Ξ	0.	0.	0	0 .	0	0	0
(8) DARLA ANZALONE	Θ	306,815.	11,731.	0	0.0	27,312.	345,858.	0
DIRECTOR OF COMMUNICATION	9		0.	0	0.0	0.	0.	0
(9) JESSICA JENSON	3	145,000.	6,000.	0.	0.	31,162.	182,162.	0
CHIEF OF STAFF	Ξ	0	0.	0.	0.	0	0	0
	(3)							
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Schedule J (Form 990) 2018

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open To Public Inspection

	YOUNG	AME	RICA'S F	OUN	DAT:	ION					420		OH HQ	moei
Part I Excess	Benefit Tra	nsacti	ons (section 5	01(c)(3	3), sect	ion 501(c)(4), and 50	1(c)(29) organization	s only					
Complete	if the organizat	ion ansy	wered "Yes" on	Form !	990, Pa	art IV, line 25a or 25b	o, or l	Form 990-EZ. Pa	art V, I	ine 40	b.			
1 (a) Name of disqu	alified person	(b) F	Relationship bet			ified	- L D-	escription of tran	JV.			(d)	Corre	cted?
(a) rearrie or disqu	amed person		person and o	rganiz	ation	- (0	c) De	escription of tran	isacuo	П		Y	es_	No
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		_										+	-	
<u> </u>		+-										+-		
2 Enter the amount section 4958 3 Enter the amount									*****					
Part II Loans	o and/or Fro	om Int	erested Per	sons										
						Part V, line 38a or F	-orm	990 Part IV lin	0.26-	ne if th	0.000	nizatio		
			, Part X, line 5,			i ait vi iiio bod oi i	OIIII	550, 1 dit 14, iii	G 20, 1	J1 11 (11	o organ	1120110	,,,	
(a) Name of interested perso	(b) Rela	tionship anization	(c) Purpose	(d) Le	onn to or m the ization?	(e) Original principal amount	(f)	Balance due) In iult?	(h) App by boa comm	ard or	1 412 44	ritten ment?
				То	From				Yes	s No	Yes	No	Yes	No
<u></u>				<u> </u>										<u> </u>
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lotal		*				> \$	_							
Part III Grants	or Assistan	e Ber	efiting Inter	este	d Per	sons.								
Complete	if the organizat	ion ansv	vered "Yes" on	Form 9	990, Pa	rt IV, line 27.								
(a) Name of inter	rested person		(b) Relationship interested pers the organiz	son an		(c) Amount of assistance		(d) Type assistan) Purp assista		ř
		\perp								\Box				
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HA For Paperwork	Reduction Act	Notice,	see the Instruc	tions	for For	m 990 or 990-EZ.		Scho	edule	L (For	m 990	or 99	0-EZ)	2018

Schedule L (Form 990 or 990 EZ) 2018 YOUNG Part IV Business Transactions Involved	AMERICA'S FOUNDATION	Ι	23-7042	029	Page 2
	•				
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of tation's tues?
				Yes	No
ELIZABETH DONATELLI	DAUGHTER OF DIRECTO	69,300.	INDEPENDENT		Х
THOMAS ROBINSON	SON OF OFFICER/DIRE	92,573.	EMPLOYMENT-		Х
Part V Supplemental Information.					
Provide additional information for resp	onses to questions on Schedule L (see in	nstructions).			
		_			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVIN	<u>G INTERESTE</u>	D PERSONS:		
(A) NAME OF PERSON: ELIZAE	ETH DONATELLI				
			"		
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	ORGANIZATI	ON:		
DAUGHTER OF DIRECTOR			<u> </u>		
(D) DESCRIPTION OF TRANSAC	TION: INDEPENDENT CO	NTRACTOR- N	ON-WAGE		
COMPENSATION					
	-				
(A) NAME OF PERSON: THOMAS	PORTNEON				
VIII WIELD OF THROOM. THOMAS	KOBINSON				
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	ORGANIZATI	ON:		
SON OF OFFICER/DIRECTOR					
(D) DESCRIPTION OF TRANSAC	TION: EMPLOYMENT- CO	MPRNSATION	AND BENEFIT	<u> </u>	
			THIS SUNDETT		
ELIZABETH DONATELLI					
THE RELATED FOUNDATION DIR	ECTOR HAS NO ROLE OR	INPUT IN D	ETERMINING '	THE	
COMPENSATION FOR THIS INDE	-				
THE THE PERSON NAMED AND THE		· · · · · · · · · · · · · · · · · · ·			
THOMAS ROBINSON					

Schedule L (Form 990 or 990-EZ) 2018

THE RELATED FOUNDATION OFFICER/DIRECTOR HAS NO ROLE OR INPUT IN

DETERMINING THE COMPENSATION FOR THIS EMPLOYEE.

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

2018

Open to Public Inspection

Name of the organization

YOUNG AMERICA'S FOUNDATION

Employer identification number 23-7042029

Pai	rt I Types of Property	11 0 10	ONDALION		23-10	142023	
Га	Types of Floperty	(a)	(b)	(c)	(d)		
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of dete noncash contributi		ts
1	Art - Works of art						
2	Art - Historical treasures	X	300	601,860.	INDEPENDENT	APPRA	ISA
3	Art - Fractional interests	·					
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests					_	
12	Securities · Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Reaf estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts		<u></u>				
25	Other ()		<u> </u>				
26	Other						
27	Other						
28	Other (
29	Number of Forms 8283 received by the organi	zation during	the tax year for c	ontributions	- ·		
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement 29			
						Yes	No
30a	During the year, did the organization receive b	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28. that it		
	must hold for at least three years from the date						
	exempt purposes for the entire holding period	_				30a	х
b	If "Yes," describe the arrangement in Part II,			***************************************		-	
31	Does the organization have a gift acceptance	policy that re	quires the review of	of any nonstandard contribut	ions?	31	X
	Does the organization hire or use third parties			192	***************************************		† <u> </u>
					14 DATE (1987) (1987) (1987) (1987)	32a	x
h	contributions? If "Yes," describe in Part II.		www.erenenenenenenenenenen		***************************************	JE45	41
33	If the organization didn't report an amount in c	olumn (c) for	a tune of property	for which column (a) is about	kad		
	describe in Part II.	Estima (e) 101	a type of property	To anion column (a) is clied	Nou,		
LHA		the leadure	tions for Form 000	`	D=14-4-3-3-4	Farm: 000	1 0010
11	. or i apermoin resourcion Act Notice, See	n16 H120 AC	10113 101 COLIU 33(J.	Schedule M (COLUI AAA	7 2018

Schedule M	(Form 990) 2018 YOUNG AMERICA'S FOUNDATION	23-7042029	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 30 is reporting in Part I, column (b), the number of contributions, the number of items received, or a conthis part for any additional information.	3, and whether the organization of both. Also com	ition plete
<u> </u>			
7-22			
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Schedule M (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Attach to Form 990 or 990-EZ.

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

2018
Open to Public Inspection

Name of the organization

YOUNG AMERICA'S FOUNDATION

Employer identification number 23-7042029

TOOMS MIDNICH D TOOMDATION 23 /042025
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TRADITIONAL VALUES, AND LEADERSHIP.
PART 1, LINE 6
YOUNG AMERICA'S FOUNDATION'S VOLUNTEERS ARE CRITICAL TO MAKING POSSIBLE
THE MANY PROGRAMS THAT ARE CONDUCTED EACH YEAR. THEY HELP WITH THE MANY
EDUCATIONAL PROGRAMS AND EVENTS AT THE REAGAN RANCH AND REAGAN RANCH
CENTER IN CALIFORNIA, AT THE VARIOUS CONFERENCES AROUND THE COUNTRY,
AND EXECUTE THE MANY CAMPUS INITIATIVES ON HUNDREDS OF COLLEGE AND
UNIVERSITY CAMPUSES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
THE NATIONAL JOURNALISM CENTER TRAINS STUDENTS TO BE ACCURATE
JOURNALISTS. THE PROGRAM PROVIDES ASPIRING JOURNALISTS WITH TRAINING IN
JOURNALISM AND PRACTICAL EXPERIENCE THROUGH MEDIA INTERNSHIPS.
EXPENSES \$ 413,953. INCLUDING GRANTS OF \$ 203,120. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11B:
AN INDEPENDENT ACCOUNTING FIRM PREPARES THE FORM 990 BASED ON INFORMATION
PROVIDED BY YOUNG AMERICA'S FOUNDATION'S FINANCE DEPARTMENT. AFTER
PREPARATION A THOROUGH REVIEW IS PERFORMED INTERNALLY BY THE FOUNDATION'S
DIRECTOR OF FINANCE AND EXTERNALLY BY OUTSIDE LEGAL COUNSEL TO THE
FOUNDATION. COPIES OF THE PREPARED FORM ARE ALSO DISTRIBUTED TO THE MEMBERS
OF THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE IRS.

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

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

FORM 990, PART VI, SECTION B, LINE 12C:

THE FOUNDATION CONDUCTS REVIEWS AS NECESSARY PURSUANT TO ITS CONFLICT OF INTEREST POLICY WHICH PERTAINS TO BOTH EMPLOYEES AND DIRECTORS.

FURTHERMORE, DIRECTORS ARE RECUSED FROM ANY DISCUSSION AND VOTES ON ALL MATTERS ON WHICH THEY HAVE A POTENTIAL OR ACTUAL CONFLICT.

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

EACH YEAR THE PRESIDENT'S COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS COMPENSATION COMMITTEE, WHICH IS MADE UP OF THREE DIRECTORS. THESE DIRECTORS DO NOT HAVE A CONFLICT OF INTEREST AS COMPENSATION COMMITTEE MEMBERS. THE COMMITTEE REVIEWS COMPARABLE PAY SCALES FOR CEOS OF NUMEROUS OTHER MAJOR COMPARABLE NON-PROFIT ORGANIZATIONS. THIS INFORMATION IS OBTAINED FROM FORM 990'S FOR THE RESPECTIVE ORGANIZATIONS VIA GUIDESTAR AND SALARIES AS REPORTED IN PUBLIC INFORMATION ON OTHER WEBSITES. THE COMMITTEE ALSO CONSIDERS THE PRESIDENT'S EXCLUSIVE AND FULL-TIME COMMITMENT TO YOUNG AMERICA'S FOUNDATION, HIS OVER 40 YEARS EXPERIENCE AS A FOUNDATION EXECUTIVE AND OVER 35 YEARS AS AN ATTORNEY, HIS CONTACTS IN THE CONSERVATIVE COMMUNITY, AND THE HOURS THAT HE WORKS AS ADDITIONAL FACTORS IN SETTING HIS SALARY AND BENEFITS. THE PRESIDENT REVIEWS EMPLOYEE PERFORMANCE AND EXPERIENCE IN SETTING THE COMPENSATION FOR THE REMAINDER OF THE FOUNDATION'S STAFF WITH THE EXCEPTION OF HIS SON LISTED IN SCHEDULE L FOR WHOM REVIEWS AND COMPENSATION IS SET BY THE DIRECTOR OF DEVELOPMENT IN CONSULTATION WITH THE FOUNDATION TREASURER.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AR, CA, CT, FL, IL, KS, KY, MD, MA, ME, MI, MS, NJ, NY, NC, OH, OK, OR, PA, RI, SC, TN, VA
WA, WV, WI

PERMANENTLY RESTRICTED CONTRIBUTION WHICH HAD BEEN ERRONEOUSLY

CLASSIFIED AS UNRESTRICTED AS WELL AS A TEMPORARILY RESTRICTED

CONTRIBUTION THAT WAS MISTAKENLY CLASSIFIED AS A PERMANENTLY RESTRICTED

CONTRIBUTION IN THE PRESENTATION OF THE FINANCIAL STATEMENTS