DLN: 93493177007228 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public Department of the Treasur ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Internal Revenue Service Inspection For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 C Name of organization D Employer identification number B Check if applicable ☑ Address change 27-4126970

☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O $\,$ box if mail is not delivered to street address) 3001 Broadway St NE No 330 $\,$ ☐ Amended return ☐ Application pending (612) 564-4858 City or town, state or province, country, and ZIP or foreign postal code Minneapolis, MN $\,\,$ 55413 $\,$ G Gross receipts \$ 9,198,352 Name and address of principal officer H(a) Is this a group return for Wokie Weah □Yes ☑No subordinates? 3001 Broadway St NE No 330 H(b) Are all subordinates Minneapolis, MN 55413 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) ☐ 501(c)() **◄** (Insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ youthprise org L Year of formation 2010 M State of legal domicile Summary 1 Briefly describe the organization's mission or most significant activities Youthprise (the Organization) is a Minnesota not-for-profit 501(c)(3) corporation established in October 2010 by The McKnight Foundation and safety. We strategically combine funding, capacity building, policy advocacy, and research and authentically engage young people in our governance and operations Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5

Youthprise is a youth-centered philanthropic organization that invests in the future of Minnesota by investing in youth. Our mission is to reduce racial disparities with and for Minnesota youth with a focus in the areas of learning and leadership, economic opportunity, and health Activities & Governance 13 21 25 6 **6** Total number of volunteers (estimate if necessary) . . . Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 11,496,895 4,587,271 Program service revenue (Part VIII, line 2g) . 169,018 159,447 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 12,014 9,765 350 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11,678,277 4,756,483 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,306,095 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 4,740,799 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,274,338 1,496,203 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 81,250 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶348,889 1,098,215 922,428 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 8,805,976 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 7,113,352 19 Revenue less expenses Subtract line 18 from line 12 . 4,564,925 -4,049,493 Net Assets or Fund Balances **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) . 6,992,871 4,275,451 1,944,072 21 Total liabilities (Part X, line 26) . 611,999 22 Net assets or fund balances Subtract line 21 from line 20 6,380,872 2,331,379 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

2018-06-11 Signature of officer Date Sign

Here

Wokie Weah President Type or print name and title Print/Type preparer's name Ashley C Rehn CPA Preparer's signature Ashley C Rehn CPA Date PTIN Check | If P00965922 2018-06-11 Paid self-employed Firm's name Redpath and Company Ltd Firm's EIN > 41-0975573 Preparer Firm's address ▶ 4810 White Bear Parkway Phone no (651) 426-7000 Use Only White Bear Lake, MN 55110 May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Form 990 (2017)

Cat No 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

Forn	n 990 (2017)					Page 2
Pa	t IIII State	ment of Program Service	e Accomplish	nments		
	 Check I	ıf Schedule O contains a respo	nse or note to a	ny line in this Part III		🗹
1		e the organization's mission		,		
class	sroom so that all		ultımate ambıtıo	n is to reduce racial di	g in youth Our mission is to cham sparities with and for Minnesota yo	
2		zation undertake any significa				□Yes ☑No
	•	be these new services on Sch				
3	Did the organi					
	services? .					🗌 Yes 🗹 No
	If "Yes," descr	be these changes on Schedul	e O			
4	Section 501(c)		ons are required	to report the amount	largest program services, as meas of grants and allocations to others,	
4a	(Code) (Expenses \$	2,716,836	including grants of \$	2,424,558) (Revenue \$	73,127)
	See Additional D					,
4b	(Code) (Expenses \$	2,676,454	including grants of \$	1,859,583) (Revenue \$	23,148)
	See Additional D	Pata				
4c	(Code) (Expenses \$	2,340,766	ıncludıng grants of \$	2,021,954) (Revenue \$	63,172)
	See Additional D	Pata				
4d	Other program					
	(Expenses \$	ıncl	uding grants of :	\$) (Revenue \$)
4e	Total prograi	m service expenses ▶	7,734,0!	56		

or X as applicable

Checklist of Required Schedules

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?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

Page 3

Nο

Nο

Nο

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Form **990** (2017)

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Yes

Yes

Yes

Yes

Yes

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Form 990 (2017)							
Part IV Checklist of Required Schedules (continued)							
		Yes	No				
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No				
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this reti	urn?						

•	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,"

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

organization? If "Yes," complete Schedule R, Part V, line 2

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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Yes

Form 990 (2017)

Yes

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No

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Nο

orm	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 52 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 1b 16	1		
		4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		No
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)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_		
_		7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
	1098-C ⁷	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		No
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)	1		
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
-	To the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	I	

orm !	990 (20	017)					Page 6
Part		Governance, Management, and DisclosureFor each "Yes" response to lines 2 a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched	lule O	See instructions	·	nse to li	
Sec		Check if Schedule O contains a response or note to any line in this Part VI A. Governing Body and Management	•	<u> </u>			<u> </u>
361	LIOII A	4. Governing body and Management				Yes	No
1a	Enter t	he number of voting members of the governing body at the end of the tax year	1a	13			
	body, o	e are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or committee, explain in Schedule O					
b	Enter t	he number of voting members included in line 1a, above, who are independent	1b	13			
2		y officer, director, trustee, or key employee have a family relationship or a busine director, trustee, or key employee?			2		No
3		e organization delegate control over management duties customarily performed b ers, directors or trustees, or key employees to a management company or other			3		No
4	Did the	e organization make any significant changes to its governing documents since the	prior l	Form 990 was filed?	4		No
5	Did the	e organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets? .	5		No
6	Did the	e organization have members or stockholders?			6		No
7a	Did the	e organization have members, stockholders, or other persons who had the powerers of the governing body?	to elec	t or appoint one or more	7a		No
b	Are an	y governance decisions of the organization reserved to (or subject to approval by s other than the governing body?) mem	bers, stockholders, or	7b		No
8	Did the	e organization contemporaneously document the meetings held or written actions lowing	under	taken during the year by			
а	The go	verning body?			8a	Yes	
b	Each c	ommittee with authority to act on behalf of the governing body?			8b	Yes	
9		e any officer, director, trustee, or key employee listed in Part VII, Section A, who zation's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> (9		No
Sec	ction I	B. Policies (Thıs Section B requests ınformation about policies not requ	ured b	y the Internal Revenu	e Code	∍.)	
						Yes	No
		e organization have local chapters, branches, or affiliates?			10a		No
b		," did the organization have written policies and procedures governing the activiti anches to ensure their operations are consistent with the organization's exempt p			10b		
	Has the form?	e organization provided a complete copy of this Form 990 to all members of its go	vernın •	g body before filing the	11a	Yes	
b	Describ	pe in Schedule O the process, if any, used by the organization to review this Form	990				
		e organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b	Were c	officers, directors, or trustees, and key employees required to disclose annually integrated in the second section of the second	terests • •	that could give rise to	12b	Yes	
С		organization regularly and consistently monitor and enforce compliance with the alle O how this was done	policy •	? If "Yes," describe in	12c	Yes	
L3	Did the	e organization have a written whistleblower policy?			13	Yes	
L4	Did the	e organization have a written document retention and destruction policy?			14	Yes	
L5		e process for determining compensation of the following persons include a review s, comparability data, and contemporaneous substantiation of the deliberation an					
а	The or	ganızatıon's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b		No
		to line 15a or 15b, describe the process in Schedule O (see instructions)					
L6a		e organization invest in, contribute assets to, or participate in a joint venture or si e entity during the year?	mılar a	arrangement with a	16a		No
	ın joint	," did the organization follow a written policy or procedure requiring the organizat venture arrangements under applicable federal tax law, and take steps to safegu with respect to such arrangements?	ard th	evaluate its participation e organization's exempt	16b		
Sec	ction (C. Disclosure					
		e States with which a copy of this Form 990 is required to be filed▶					
		MN n 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99		990-T (501(c)(3)s only)			
		ble for public inspection Indicate how you made these available Check all that ap		•			
0		wn website		•			
	policy,	be in Schedule O whether (and if so, how) the organization made its governing do and financial statements available to the public during the tax year		•			
20		he name, address, and telephone number of the person who possesses the organ Organization 3001 Broadway St NE No 330 Minneapolis, MN 55413 (612) 564-48		's books and records			

Part VII

(15) Senuri Rauf

(16) Elizabeth Zalanga

(17) Gabrielle Knight Director (Part Year)

Director

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, or 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
- compensated employees, and former such persons

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (E) (A) (D) (F) (B) (C) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation week (list person is both an officer from the from related compensation anv hours and a director/trustee) organization organizations from the for related (W- 2/1099-(W-2/1099organization and Individual to or director ΨŪ MISC) MISC) organizations Ē related Institutional 호 below dotted nest organizations employ 3 line) con trustee P pensat Ē 3.00 (1) Joseph Stackhouse Х Co-chair 1 00 (2) Chad Lassen Х 0 0 1 00 (3) Antonio Cardona Х Х Secretary 3 00 (4) Renelle Mensah х 1 00 (5) Jolene Rotich Х 0 1 00 (6) Rev Kelly Chatman 0 Director 1.00 (7) Kelly Elkın Director 1 00 (8) Maher Adduselam Х 1 00 (9) Maya Burnaugh n 0 X Director (Part Year) 1.00 (10) Peter Gabler Director 1 00 (11) Quincy Lewis 0 Х Director (Part Year) 1 00 (12) Steve Asencio 0 Director (Part Year) 1.00 (13) Boriana Strzok Director 1 00 (14) Phuc Nguyen 0 Х 1 00

Х

1 00

1 00

Part VII

Savage, MN 55378

compensation from the organization ► 1

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) **(F)** Estimated

Form **990** (2017)

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(A) Name and Title	(B) Average hours per week (list any hours							(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	C	(F) Estimated amount of othe compensation from the organization an	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)		ganizat relat organiza	ed
(18) Maria Lee	1 00	×						0		0		0
Director (Part Year)		•…^`						ŭ		<u> </u>		
(19) Wokie Weah	40 00			l x				126,490				31,219
riesident								,		1		
(20) Marcus Pope	40 00			l x				120,444				15,934
vice riesidelit								,				
(21) Sheila Gothmann	34 00			×				88,297				22,686
Chief Financial Officer												
						<u> </u>						
1b Sub-Total	t VII, Section A				1			335,231	0			69,839
Total number of individuals (including b of reportable compensation from the or	ut not limited to			abov	/e) v	who re	ceıv	ed more than \$100	,000			
											Yes	No
3 Did the organization list any former off line 1a? <i>If "Yes," complete Schedule J fa</i>			key (emp •	loye •	e, or h	nighe	est compensated er		3		No
For any individual listed on line 1a, is the organization and related organizations of individual										4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization? It								ganızatıon or ındıvıd	1	5		No
Section B. Independent Contractor	rs										ı	
Complete this table for your five highes from the organization Report compensation.	t compensated in									ensati	ion	
Namo and	(A) d business address							Descript	(B)		(C) Compen	
Tayo Consulting Group	. 545/11055 dudi (655								tance for Grantees	<u> </u>		116,188
6412 147th Street West												

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

		Check if Schedul	e O contains :	a respo	onse or note to any	(A) Total revenue		(B) Related or	(C) Unrelated	(D) Revenue
								exempt function revenue	business revenue	excluded from tax under sections 512-514
s &	1 <i>a</i>	Federated campaig	ns	1a			•	•		
	1	b Membership dues		1 b						
בַּ בַּ	•	c Fundraising events		1 c						
i A	•	d Related organizatio	ns	1 d						
בּׁי כַּ	•	e Government grants (co	ontributions)	1e	3,624,156					
commissions, ones, orderes and Other Similar Amounts	1	 All other contributions, and similar amounts no above 	, gıfts, grants, ot ıncluded	1f	963,115					
continuations, critics, crafits and Other Similar Amounts	9	g Noncash contribution in lines 1a-1f \$	ons included	_						
an	_h	Total.Add lines 1a-1	.f		<u> </u>	4,587,271				
Пę					Business	Code				
Program Service Revenue	2a	Fees for Service				900099	159,44	7 15	9,447	
2 <u>*</u>	Ь									
<u>ک</u>	С			_						
₹	d			_						
ran	e f	All other program se	rvice revenue	_						
7 0g		Total.Add lines 2a-2f			_	159,447				
-		Investment income (ii			interest and other	7				
	s	similar amounts) .			•	•	,345			7,34
		Income from investme				•				
	5	Royalties				•				
	62	Gross rents	(ı) Rea		(II) Personal	-				
	Ju									
	b	Less rental expenses								
	c	Rental income or				+				
		(loss)								
	d	Net rental income o								
	72	Gross amount	(ı) Securit	ies	(II) Other	-				
	<i>,</i> a	from sales of assets other	4,4	44,289						
		than inventory								
	ь	Less cost or other basis and	4.4	41,869						
	_	sales expenses		2,420		4				
		Gain or (loss) Net gain or (loss)			<u> </u>		2,420			2,42
		Gross income from fi					<u> </u>			,
ne		(not including \$		of						
Revenue		contributions reporte See Part IV, line 18		a	1					
Re	b	Less direct expense	s	b		1				
ē	c	: Net income or (loss)	from fundrais	sing ev	ents					
Other	9a	Gross income from g See Part IV, line 19		es						
		See Fare IV, mile 19		a	}					
	ь	Less direct expense	s	b		1				
	c	: Net income or (loss)	from gaming	activit	ies >					
	10a	Gross sales of invent returns and allowand								
		returns and anoward		a	}					
	ь	Less cost of goods s	sold	b		1				
		Net income or (loss)		invent	tory					
[Miscellaneous			Business Code					
	11	.a								
	b	·								
	c									
		All other revenue .								
	e	Total. Add lines 11a	-11d				_			
I			Instructions						T	

Part IX Statement of Functional Expenses	lumana All alla area		slata salverse (A)	Page 10
Section 501(c)(3) and 501(c)(4) organizations must complete all col Check if Schedule O contains a response or note to any	-	·	olete column (A)	🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	6,028,102	6,028,102		
2 Grants and other assistance to domestic individuals See Part IV, line 22	273,018	273,018		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	4,975	4,975		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	405,070	128,468	140,773	135,829
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	874,322	705,762	143,490	25,070
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	33,478	29,388	4,090	
9 Other employee benefits	94,488	94,011	477	
10 Payroll taxes	88,845	60,207	17,982	10,656
11 Fees for services (non-employees)				
a Management	60,318	60	60,258	
b Legal	43,826	14,443	29,383	
c Accounting	50,030		50,030	
d Lobbying	30,557	30,557		
e Professional fundraising services See Part IV, line 17	81,250	·		81,250
f Investment management fees				<u> </u>
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	268,988	189,345	17,045	62,598
12 Advertising and promotion				
13 Office expenses	135,286	76,262	32,630	26,394
14 Information technology	63,481	38,145	22,442	2,894
15 Royalties	,	,		_,
F	131,002	9,490	120,070	1,442
16 Occupancy	57,909	44.033	11,225	2,651
18 Payments of travel or entertainment expenses for any	37,909	44,033	11,223	2,631
federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates	44.500		11.500	
22 Depreciation, depletion, and amortization	44,593		44,593	
23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	16,471		16,471	
a Professional Developmen	12,559	6,864	5,695	
b Membership Dues	959	899	60	
c				
d				
e All other expenses	6,449	27	6,317	105
25 Total functional expenses. Add lines 1 through 24e	8,805,976	7,734,056	723,031	348,889
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

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33

34

Net

Page **11**

2,983

40.255

657.900

9,200

4.275.451

1,124,373

2,331,379

4.275.451

Form **990** (2017)

323,339

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

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Total net assets or fund balances

Total liabilities and net assets/fund balances

Investments—publicly traded securities .

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related See Part IV, line 11

		Beginning of year		End of year
1	Cash-non-interest-bearing	2,090	1	
2	Savings and temporary cash investments	1,972,203	2	2,

2.633.128 2 4,911,341 931,985 3 Pledges and grants receivable, net . . 3 4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L

252.271

95 859

6.992.871

226.187

385.812

10c

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12

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6,380,872

6.992.871

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . Assets Notes and loans receivable, net . Inventories for sale or use . 8 11.378 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a 910,171 basis Complete Part VI of Schedule D

10b

Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, 0 25 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D

496.360 26 611,999 Total liabilities. Add lines 17 through 25 . 26 1,944,072 Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and complete lines 27 through 29, and lines 33 and 34.

Fund Balances 27 188.835 27 487.509 Unrestricted net assets 28 6.192.037 28 1.843.870 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34. Assets or

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2a

2b

2c

3a

3b

Yes

Yes

Yes

Yes Form 990 (2017)

Νo

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

Consolidated basis

Consolidated basis

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

separate basis, consolidated basis, or both

☐ Cash ☑ Accrual ☐ Other 1 Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in

Additional Data

Software ID:

Software Version:

EIN: 27-4126970 Name: Youthprise

Form 990 (2017)

Form 990, Part III, Line 4a: Economic Opportunity Youthprise creates opportunities for economic prosperity by supporting programs and initiatives that build workforce skills, promote youth entrepreneurship, and expose youth to career pathways. We work with a range of stakeholders across sectors to equip young people with the economic tools to thrive. In 2017, Youthprise awarded grants to connect young people with career pathways in high demand industries such as healthcare, IT, automotive and customer service in the Twin Cities and Greater Minnesota communities including Northfield, Duluth and Sauk Rapids. In 2017 Youthprise invested \$2,424,558 in Economic Opportunity for grants. and strategic investments

Form 990, Part III, Line 4b:

Learning and Leadership Youthprise promotes the learning, leadership, and social-emotional development of youth Programs and initiatives supported in this area expose youth to arts and culture, enrichment activities, technical assistance and youth leadership opportunities. We seek to shift how programs interact with youth and support

programs that engage youth in leadership and governance, a practice that we model at Youthprise We embed young people across all areas of our organization, and we have 50% representation of youth on our Board of Directors. In 2017 Youthprise invested \$1,859,583 in Learning and Leadership for grants and strategic investments.

Health and Safety Youthprise supports programs and initiatives that promote the health and safety of young people. In addition to meeting basic food needs through our Nutrition Program, we work with community-based organizations to link healthy lifestyles with good nutrition. We take a holistic approach to health and safety and advance

intervention strategies that prevent the criminalization of youth, which can pose a threat to public safety. In 2017 Youthprise expanded our Nutrition Program which served 3,800 unduplicated youth with over 225,000 meals and snacks at 45 sites. Additionally, we support a number of initiatives that seek to reduce disparities in the juvenile

justice system and contact between non-violent youth and law enforcement. In 2017 Youthprise invested \$2,021,954 in grants and strategic investments

Form 990, Part III, Line 4c:

efile GRAPHIC print - DO NOT PROCESS				As Filed Data -			DLN: 9:	3493177007228				
SC		ULE A		Public (Charity Statu			ort	OMB No 1545-0047 2017			
9901	EZ)				4947(a)(1) nonexe	empt charitable	trust.		201 /			
•		f the Treasury	▶ Infe	ormation abou	► Attach to Form ut Schedule A (Form <u>www.irs.g</u>			ictions is at	Open to Public Inspection			
Nam Youth	e of th	he organiza	tion					Employer identific	ation number			
								27-4126970				
	rt I				us (All organization : it is (For lines 1 thro			see instructions.	-			
1	/ gai2		•		sociation of churches	5 ,	,	(A)(i)				
2		•		•								
3			school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
_		·	•	·	-			•				
4	Ш		medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's ame, city, and state									
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170			
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).				
7	✓	_		mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in			
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)					
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a			
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	pport from gross			
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).				
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box			
а		organizatio	n(s) the pow		ated, supervised, or cappoint or elect a majo							
b		Type II. A manageme	supporting on t of the sup	rganization sup	ervised or controlled i							
C		Type III f	unctionally i	integrated. A s	supporting organizatio ons) You must com				ted with, its			
d		Type III n functionally	on-function integrated	ally integrated The organization	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar				
e		Check this	box if the org	anızatıon receiv	ved a written determir	nation from the II		pe I, Type II, Type II	functionally			
f	Enter			ion-functionally l organizations	integrated supporting	organization						
g				_	ipported organization(5)						
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
						Yes	No					
Tota	l								l			

(b)(1)(A)(ix)

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part											
III. If the organization fails to qualify under the tests listed below, please complete Part III.)											
Section A. Public Support											
Calendar year											

S	ection A. Public Support	<u> q</u>		, p	<u> </u>	,		
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e)	2017	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do not	5,190,712	1,651,538	7,729,402	11,496,895		4,587,271	30,655,81
2	include any "unusual grant ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
_	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 3	5,190,712	1,651,538	7,729,402	11,496,895		4,587,271	30,655,81
	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							18,394,72
	Public support. Subtract line 5 from line 4							12,261,09
S	ection B. Total Support							
	Calendar year	(a)2013	(b) 2014	(c)2015	(d) 2016	(e)	2017	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	5,190,712	1,651,538	7,729,402	11,496,895		4,587,271	30,655,81
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,906	5,774	4,954	4,568		7,345	27,54
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)				350			35
11	Total support. Add lines 7 through 10							30,683,71
12	Gross receipts from related activities,	etc (see instruction	ons)			12		674,15
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ırd, fourth, or fıfth	tax year as a sec	tion 501	(c)(3) orga	nızatıon,
	check this box and stop here						▶ □	
	ection C. Computation of Publi							
	Public support percentage for 2017 (li			olumn (f))		14		39 960 %
	Public support percentage for 2016 Sc					15		29 520 %
16a	33 1/3% support test—2017. If the	e organization did r	not check the box	on line 13, and line	e 14 is 33 1/3% oi	more, c	heck this b	
Ь	and stop here. The organization qual 33 1/3% support test—2016. If the				and line 15 is 33 i	/3% or n	nore, check	this
17a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization Part VI how the organization meets	t— 2017. If the orgon meets the "facts	ganization did not -and-circumstance	check a box on lines" test, check this	box and stop he	re. Expl	aın	▶□
b	organization 10%-facts-and-circumstances ter 15 is 10% or more, and if the organization Explain in Part VI how the organization	zation meets the "i	facts-and-circumst	ances" test, check	this box and sto	p here.		▶□
	supported organization						•	▶ □

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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	3b		

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	3b				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 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					

				3.
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	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
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		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	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		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "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	4b			
С	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)	5a			

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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a			
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)			

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 Carryover from 2012 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

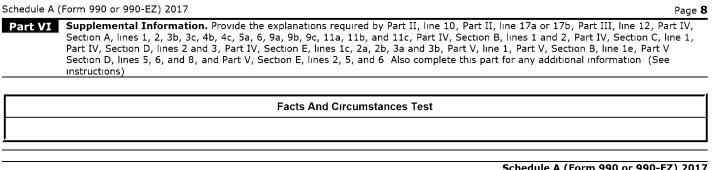
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.



SCHEDULE C

(Form 990 or 990-

EZ)

3

5

5

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

DLN: 93493177007228

Open to Public Inspection

Department of the Treasury ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at Internal Revenue Service www.irs.gov/form990.

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

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) organizations Complete Part III **Employer identification number** Name of the organization Youthprise 27-4126970 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

	that were promptly and directly delivere se (PAC) If additional space is needed, p (b) Address		(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none enter -0-
L			
2			
3			
1			

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

Did the filing organization file Form 1120-POL for this year?

Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year?

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

(a) 2014

458,462

114,616

(b) 2015

520,113

22,041

130,028

22,041

(c) 2016

505,668

11,143

126,417

1,143

(d) 2017

590,299

30,557

147,575

557

Schedule C (Form 990 or 990-EZ) 2017

(e) Total

2,074,542

3.111.813

63,741

518,636

777,954

23,741

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

Part II-A

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file form 5768 (election under section 501(b))	led			
	Form 5768 (election under section 501(h)).	(a)		(b)	
For e activi	each "Yes" response on lines 1a through 11 below, provide in Part IV a detailed description of the lobbying vity	Yes	No	Amou	ınt
1	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				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?	í I			
е	Publications, or published or broadcast statements?	í l			
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				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1			
b	If "Yes," enter the amount of any tax incurred under section 4912	<u> </u>	L		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	í [L		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1			_
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c))(5), or	section		_
	501(c)(6).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	165	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	+	
3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	+	
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	1/5) or		F01(C	V/6'
بنكتا	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part)(u)
	answered "Yes."	,	IIII -,	,	
1	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).				
а	Current year	2a			
b	Carryover from last year	2b			
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
	art IV Supplemental Information				_
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), tructions), and Part II-B, line 1 Also, complete this part for any additional information	Part II-A	ـــــــ ۱, lines 1 ar	nd 2 (se	e
	Return Reference Explanation				_

A lobbyist was paid for direct lobbying

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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.

DLN: 93493177007228 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury

(ii) Assets included in Form 990, Part X

Revenue included on Form 990, Part VIII, line 1

(Form 990)

Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** 27-4126970 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 4 2 Aggregate value of contributions to (during year) 0 0 Aggregate value of grants from (during year) Aggregate value at end of year 22.930 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? ✓ Yes □ No. 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? ✓ Yes □ No 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 an 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 Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, 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 year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 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

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

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

Par	11111	Organizations Maintaining Col	lections of Art,	Histor	ical Tı	reası	ires, or	Other	Similar A	ssets (continued	1)
3		the organization's acquisition, accession (check all that apply)	n, and other record	s, check	any of	the fo	llowing th	nat are a	significant	use of its	s collectio	n
а		Public exhibition		d		Loan	or excha	nge prog	ırams			
b		Scholarly research		е		Othe	r					
c		Preservation for future generations										
4	Provid Part >	de a description of the organization's col KIII	lections and explair	n how the	ey furth	ner the	e organiza	ation's ex	kempt purpo	ose in		
5	asset	g the year, did the organization solicit o s to be sold to raise funds rather than to							nılar	□ Ye	es 🗆	No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		orm 990), Part	IV, lı	ne 9, or	reporte	ed an amoi	unt on I	Form 99	0, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other interme	diary for	· contril	bution	s or othe	r assets	not	☐ Y €	es 🗌	No
ь	If "Ye	es," explain the arrangement in Part XIII	and complete the t	following	table				Δ	Amount		
С	Begin	ining balance						1c				
d	Addıt	ions during the year						1d				
е	Dıstrı	butions during the year						1e				
f	Endın	g balance						1f				
2 a	Dıd th	ne organization include an amount on Fo	orm 990, Part X, line	≘ 21, for	escrow	or cu	istodial a	ccount lia	ability?	□ Ye	es 🗆	No
b	If "Ye	s," explain the arrangement in Part XIII	Check here if the	explanat	ion has	been	provided	l in Part :	XIII		Г	٦
Pa	rt V	Endowment Funds. Complete if					•					
		'	(a)Current year		rior yea				(d)Three ye		(e)Four y	ears back
1 a	Beginn	ing of year balance										
b	Contrib	outions										
С	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
	and pro	expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2	Provid	de the estimated percentage of the curre	ent year end balanc	e (line 1	g, colu	mn (a)) held as	5				
а	Board	d designated or quasi-endowment 🕨										
b	Perm	anent endowment 🟲										
С	Temp	orarily restricted endowment >										
		ercentages on lines 2a, 2b, and 2c shou	•									
3a	organ	nere endowment funds not in the posses iization by nrelated organizations	ssion of the organiza	ation tha	t are h	eld an	d adminis	stered fo	r the		Ye a(i)	s No
		elated organizations			•						a(ii)	
b		es" on 3a(II), are the related organization	ns listed as required	on Sche	• • • edule R	· .	• •				3b	
4	Descr	ibe in Part XIII the intended uses of the	organization's end	owment	funds							
Pa	rt VI	Land, Buildings, and Equipme	nt.									
		Complete if the organization answ										1
	Descri	ption of property (a) Cost or oth (investme		st or other	basis (d	other)	(c) Accı	ımulated o	lepreciation		(d) Book v	alue
1a	Land											
b	Buildin	gs										
c	Leaseh	old improvements			3	35,398			421			34,977
d	Equipm	nent			33	34,051			251,850			82,201
е	Other				54	10,722						540,722
Tota	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colui	mn (B),	, line :	10(c)) .		>			657,900

Investments—Other Securities. Complete if th See Form 990, Part X, line 12.	ie organizat	ion answer	ed "Yes" on Form 99	00, Part IV, line 11b.
(a) Description of security or category (including name of security)		(b) Book value		od of valuation f-year market value
Financial derivatives				
Closely-held equity interests Other	· · ·			
al. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
rt VIII Investments—Program Related. Complete if the organization answered 'Yes' on F	orm 990, Pa			
(a) Description of investment	(b) Bo	ok value		od of valuation f-year market value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13)	•			
art IX Other Assets. Complete if the organization answered (a) Description		n 990, Part I	V, line 11d See Form	990, Part X, line 15 (b) Book value
tal. (Column (b) must equal Form 990, Part X, col (B) line 15)				•
Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	nswered 'Ye	es' on Form	990, Part IV, line 1	1e or 11f.
(a) Description of liability		(b) Book	value	
Federal income taxes se liability			496,360	
ise naunity			+90,500	
			l l	

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Page 4

8,805,976

8.805.976

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Other (Describe in Part XIII)

Add lines 2a through 2d

Supplemental Information

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Add lines **4a** and **4b**

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Part XI

c

d

3 4

b

5

Part XIII

See Additional Data Table

Return Reference

1 8,805,976 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

2a 2b

2c

2d

4a

4b

Explanation

2e

3

4c

5

Page 5	Schedule D (Form 990) 2017			
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

EIN: 27-4126970 **Name:** Youthprise

Supplemental Information

Return Reference	Explanation
Part X, Line 2	A tax expense or benefit from an uncertain income tax position (including tax-exempt status) may be recognized only when it is more likely than not that the position will be sustained upon examination by taxing authorities. Management believes the organization has no uncertain income tax positions that would result in an accrual, expense or benefit under the more likely than not standard.

Supplemental Information			
Return Reference	Explanation		
Parts XI and XII	The Organization elected to early implement the provisions of Accounting Standards Update (ASU) 2016-02 (Topic 842) - Leases, and ASU 2016-14, Not-for-Profit Entities (Topic 958) - Presentation of Financial Statements of Not-for-Profit Entities ASU 2016-02 addresses ac counting by lessees for leases that have been classified as finance leases or operating le ases. The presentation in the 2017 financial statements has been adjusted accordingly. ASU 2016-02 is required to be applied using a modified retrospective approach. The 2017 Form 990 has been prepared to include a \$426,485 right-of-use asset and a \$496,360 lease liabil ity for the Organizations operating lease. ASU 2016-14 addresses the complexity and unders tandability of net asset classification, deficiencies in information about liquidity and a vailability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The presentation in this form 990 has been adjusted.		

accordingly

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G

DLN: 93493177007228

OMB No 1545-0047

Open to Public Inspection

Supplemental Information Regarding Fundraising or Gaming Activities

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

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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

Employer identification number Name of the organization Youthprise 27-4126970 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants ✓ Mail solicitations ✓ Solicitation of government grants Phone solicitations Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Fundraising Crowley White & Helmer Campaign for 1619 Dayton Avenue Suite Accelerator 250,000 81,250 No 168,750 Initiative Saint Paul, MN 55104 3 8 10

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Total

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

Cat No 50083H

250,000

Schedule G (Form 990 or 990-EZ) 2017

168,750

81,250

	than \$15,000 of fundraising e gross receipts greater than \$5	vent contributions and			
	groot receipts grouter than ye	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col (a) through
		(event type)	(event type)	(total number)	col (c))
ne					
Revenue					
ă	1 Gross receipts				
	2 Less Contributions				
	4 Cash prizes				
Expenses	5 Noncash prizes				
	6 Rent/facility costs				
å å	7 Food and beverages				
Direct E	8 Entertainment				
ă	9 Other direct expenses				
	10 Direct expense summary Add lines 4 t				
Day	11 Net income summary Subtract line 10 11 Gaming. Complete if the organization			>	mara than #15 000
Pal	on Form 990-EZ, line 6a.	anizacion answered 16	es on Form 990, Part I	rv, mie 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Expenses	2 Cash prizes				
ed Xi	3 Noncash prizes				
Direct	4 Rent/facility costs				
<u>ā</u>	5 Other direct expenses				
		☐ Yes%	☐ Yes	☐ Yes%	
	6 Volunteer labor	☐ No	☐ No	☐ No	
	7 Direct expense summary Add lines 2 t	through 5 in column (d)		•	
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	nn (d)		
9	Enter the state(s) in which the organizati	on conducts gaming activ	ities		
a	Is the organization licensed to conduct ga	aming activities in each of	these states?		☐ Yes ☐ No
b	If "No," explain				
10a b	Were any of the organization's gaming lic	censes revoked, suspende		e tax year?	Yes No

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page 3	
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No		
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entit g?	Y	□Yes	□No		
13	Indicate the percentage of gaming acti	vity conducted in					
а	The organization's facility		13	а		%	
b	An outside facility		13	ь		%	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records						
	Name ►						
	Address •						
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		□Yes	□No		
b		evenue received by the organization > \$ at the third party > \$	and the				
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ►						
16	Gaming manager information						
	Name ▶						
	Gaming manager compensation ▶ \$						
	Description of services provided ►						
	☐ Director/officer	☐ Employee ☐ Independent contractor					
17	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable distributions from the gaming proceeds to)	□Yes	Пио		
b							
Pai		n. Provide the explanations required by Part I, line 2b, coloc, 16, and 17b, as applicable. Also provide any additional				s).	
	Return Reference	Explanation					

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLI	N: 934931770	07228	
Schedule I (Form 990) Department of the	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.								OMB No 1545-0047 2017 Open to Public Inspection	
Treasury Internal Revenue Service	► Infor	mation about Schedu	le I (Form 990) and its	instructions is at <u>wи</u>	<u>/w.irs.gov/form990</u> .					
Name of the organization Youthprise							oyer identific 126970	ation number		
Part I General Info	rmation on Grants	and Assistance				27-41	120370			
Does the organization n the selection criteria use	naintain records to sub ed to award the grants	ostantiate the amount of	the grants or assistance,	the grantees' eligibility	for the grants or assistant	ce, and		✓ Yes		
			se of grant funds in the Ui					⊻ fes	□ NO	
			ind Domestic Governme ditional space is needed	ents. Complete if the o	rganization answered "Yes	" on Form 990,	Part IV, line	21, for any recip	ient	
(a) Name and address of organization or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descri noncash as		(h) Purpose o or assistance	f grant	
(1) See Additional Data										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
		-	s listed in the line 1 table				▶		109	
For Paperwork Reduction Act N				Cat No 50055			Sch	edule I (Form 990) 2017	

(d) Amount of

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

(c) Amount of

(b) Number of

(2) (3) (4)

(e) Method of valuation (book.

Page **2**

(f) Description of noncash assistance

(5) (6)(7) Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part IV

Return Reference Explanation Part I. Line 2 501(c)(3) of the Internal Revenue Code of 1986, as amended (the Code) No portion of this grant is earmarked for use in carrying on propaganda or otherwise

Youthprise makes strategic investments to non-profits, individuals, and other entities to further our mission When accepting a grant, funds are typically designated to serve a geographic area, meet listed conditions, and for a period of time. Grantees agree to use grant funds exclusively for charitable purposes as described in Section attempting to influence legislation. Grantees agree not to use any portion of the grant funds to participate in any political campaign on behalf of or in opposition to any candidate for public office, to make grants to individuals on a non-objective basis, or for any non-charitable purpose. In addition, each grantee agrees that it will not promote, support, or engage in terrorism of any kind, nor will it make sub-grants to any entity or individual that engages in these activities. Any unused portion of the grant, or amounts not used for charitable purposes, will be returned to Youthprise. This grant is awarded with the understanding that a report will be submitted to Youthprise describing progress toward outcomes of the grant Reports cover the use of grant funds (including, without limitations, salaries, travel and supplies) compliance with the terms of the grant, and progress made toward achieving the purpose of the grant. Such reports shall include copies of all press releases and other public announcements of the grant. Installment payment may be withheld in the event of delays in completing the purposes of the grant and/or a breach by the grantee of any of the terms of the Agreement or the grant conditions. The grantee shall maintain financial and other records that specifically show use of grant funds exclusively for the purposes of the grant. A separate bank account for the grant is not required, but it is necessary that a separate accounting of this grant be maintained. Grantees are also required to satisfy grant conditions based on progress toward completion of the deliverables described in the grant conditions. Nongovernmental grantee has submitted to Youthprise a determination letter of tax exemption issued by the Internal Revenue Service that states the grantee is tax exempt under Section 501(c)(3), and is not a private foundation as defined in Section 509(a) of the Code. The grantee further states that its determination letter is still valid and the organization's tax exempt status has not been revoked. The grantee is required to provide in writing to Youthprise within 10 days of receiving notice of any changes to its tax exempt. status, including private foundation status under Section 509(a) In the event the grantee has failed to comply with the terms of the Agreement or if its tax-exempt status is revoked by the Internal Revenue Service, the grantee, upon written notice from Youthprise, shall immediately return all unexpended grant funds to Youthprise

Part II Grants to Organizations

Schedule I (Form 990) 2017

(a) Type of grant or assistance

Part III can be duplicated if additional space is needed

and Youthprise may terminate the Agreement

Additional Data

1132 28th Ave S Ste 6 Moorhead, MN 56560

Saint Paul, MN 55130

579 Wells Street

American Indian Family Center

41-1841352

Software ID: **Software Version: EIN:** 27-4126970 Name: Youthprise

orm 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Afro American Development Association	47-2210302	501(c)3	25,000				Increasing the Organizational Capacity		

24,000

Waaban Ogimaawag -

Tomorrows Leaders

501(c)3

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance Amherst H Wilder Foundation 41-0693889 501(c)3 96.005 Opportunity Reboot 451 Lexington Parkway advancing economic Saint Paul, MN 55104 opportunity for youth Annex Teen Clinic 23-7236943 501(c)3 189,000 Better Together 5810 42nd Ave N Hennepin prevent Robbinsdale, MN 55422 adolescent pregnancy

and promote healthy youth development

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Arts-US 41-1843500 501(c)3 37.000 YouthBank

1221 Marshall Ave St Paul, MN 55104 Association of Minnesota 41-0802524 501(c)3 238,958 Counties

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Juvenile detention lalternatives 125 Charles Avenue Saint Paul, MN 55103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 41-1922813 501(c)3 20.000 Banyan Community ACES-Adolescent 2529 13th Ave S Educational Support

Minneapolis, MN 55404 Beyond Walls Urban Squash 51-0607378 501(c)3 1,500 Twin Cities

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Sponsorship 123 Harvard Street SE

Minneapolis, MN 55455

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BrandLab 80-0199088 501(c)3 15.000 Connect Alumni

100 North 5th Street Minneapolis, MN 55101						Leadership
Center for Multicultural Mediation 2021 East Hennepin Avenue Suite 195 195	81-0826705	501(c)3	25,000		I .	African Youth Dispute Resolution Program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55413

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 41-1290349 501(c)3 200 Centro Tyrone Guzman Youthprise annual 1915 Chicago Avenue S

10,000

Isummit

Transformational

Leadership Pipeline

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Minneapolis, MN 55404 Children's Defense Fund

St Paul, MN 55103

555 Park Street Suite 410

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance Camana construction Mandanta and O 41 1404000 E01/-\2 2E 000 CALAM Tarkinkii

Rochester STEM Spoken

Word and Leadership

Community Mediation &	41-1404009	JOT(C)21	25,000		SALAM IIIIIIauve
Restorative Services Inc					
9220 Bass Lake Road Suite					
270					
New Hope, MN 55428					

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

41-1228092

75 Fifth Street West Suite 304

COMPAS Inc

St Paul, MN 55102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Comunidades Latinas Unidas 41-1386986 501(c)3 20.000 YA - Youth in Action En Servicio Expansion

Job Training

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

712 University Avenue West

Saint Paul, MN 55104

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance

EAGLE Youth Leadership

Program

Dream of Wild Health (Peta Wakan Tipi)	41-1632662	501(c)3	10,000		Native American Youth Ed and Leadership
PO Box 68					Lu anu Leadership
Scandia, MN 55073					

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Eradicating Achievement Gap &

Learning Empowerment Inc

72 10th Ave S Suite 104 Waite Park, MN 56387

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 501(c)3 10.000 ExpandED Schools 13-4004600 Partner contribution for 1440 Broadway 16th Floor Every Hour Counts New York, MN 10036 Family Partnership 41-0693858 501(c)3 36.394 Better Together 414 South 8th Street Hennepin prevent Minneapolis, MN 55404 adolescent pregnancy and promote healthy

youth development

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 23-7133742 501(c)3 29.600 Better Together Family Tree Clinic

County

1619 Dayton Avenue Suite 205 Hennepin prevent Saint Paul, MN 55104 ladolescent pregnancy and promote healthy youth development

501(c)3 FamilyWise Services 41-1343909 289,500 High Fidelity 3036 University SE | Wraparound in Ramsev

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55414

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Friends of the Saint Paul Public 41-6029683 501(c)3 160.416 Expanded Learning

opportunity for youth

Library Systems 1080 Montreal Avenue Suite 2 Saint Paul, MN 55116

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

381 East Robie Street

Saint Paul, MN 55107

Guadalupe Alternative 41-0906127 501(c)3 213.981 Opportunity Reboot Programs advancina economic

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Hallie Q Brown Community 41-0693846 501(c)3 482.550 Community Center Ambassadors

Capacity Building

Project

270 N Kent Street Saint Paul, MN 55102					
Hope United Community Development Corporation 1201 37th Avenue North	20-0875964	501(c)3	7,000		LKI Summers Academic Enrichment Camp & Tour Experiences

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55412

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 41-1594894 501(c)3 400 YouthBank IFP Minnesota 550 Vandalia Street Ste 120 Saint Paul, MN 55114

Field Building

45.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Ianıte Afterschool

Saint Paul, MN 44114

204

970 Raymond Avenue Suite

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Impact Living Christian Center 20-2954146 501(c)3 500 Sponsorship 3620 East 26th Street

YouthBank

17,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Minneapolis, MN 55406
Indigenous Roots

24 Nelson Street Saint Paul, MN 55119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 36-3451562 501(c)3 115.543 Initiative Foundation Opportunity Reboot

405 First Street SE advancing economic Little Falls, MN 56345

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 554091516

opportunity for youth InnerCity Tennis Foundation 41-6038537 501(c)3 13,500 Youth Urban Tennis 4005 Nicollet Avenue South Fund

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Intermedia Arts of Minnesota 41-1226945 501(c)3 39.000 Art-Changes-Everything

2822 Lyndale Ave S Minneapolis, MN 55408			·		-
International Institute of Minnesota	41-0693912	501(c)3	8,000		Beautiful Trials

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1694 Como Avenue St Paul, MN 55108

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Irreducible Grace Foundation 38-3895130 501(c)3 18.000 Technical Assistance

1637 Wilson Ave
Saint Paul, MN 55106

Islamic Civic Society of A1-2015497 501(c)3 43,837

America
504 Cedar Ave S

East African Youth at Work youth employment

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55454

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Isuroon (Prevention Health 42-1651737 501(c)3 34.315 Somalı Youth Care Agency) Communications

1600 Fast Lake Street Internship and Minneapolis, MN 55407

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 7844 Eagan, MN 55107

Sponsorship 45-5052650 501(c)3 14.000 Capacity Building JK Movement

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

East African Youth at

Work vouth

employment

					1	
Juxtaposition Inc 2007 Emerson Avenue North Minneapolis, MN 55411	41-1851915	501(c)3	49,203			Capacity Building, Systems Change, Environmental Racism

68,609

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Ka Joog Nonprofit Organization

419 Cedar Avenue South 257

Minneapolis, MN 55454

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Keystone Community Services 41-0693924 501(c)3 4 625 YouthBank

2000 St Anthony Blvd Saint Paul, MN 55104	41 0055524	301(0)3	4,023		Toutilbai
La Oportunidad 2700 East Lake Street Suite	36-3537919	501(c)3	17,500		Latino Po Programs

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55406

Power Youth ms and 3100 Sponsorship

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 41-1859085 501(c)3 17.067 Mentoring Partnership of Opportunity Reboot advancing economic

Advancina economic

opportunity for youth

Minnesota
615 1st Avenue NE Suite 125
Minneapolis, MN 55413

181.079

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

MIGIZI Communications Inc.

1516 East Lake Street 300

Minneapolis, MN 55407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance Minneapolis Youth Coordinating 41-1566656 501(c)3 31.000 Expanded Learning Board Systems 330 Second Avenue South Suite 540

10,150

Membership

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

41-1269275

Minneapolis, MN 55401

Minneapolis, MN 55401

800 Washington Ave N Suite

Minnesota Council on

Foundations

703

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Neighborhood House 41-0693916 501(c)3 20.000 Literacy Programming

employment

179 Robie Street East for Urban Youth St Paul, MN 55107 New American Development 32-0241006 501(c)3 119,106 Fast African Youth at Work vouth

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Center 115 East Lake Street Suite B03 Minneapolis, MN 55408

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Northfield Arts Guild 41-6051879 501(c)3 2.650 The Studio 304 Division Street South

Northfield, MN 55057 Northfield Healthy Community 26-2852506 501(c)3 306.350

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

128

Northfield, MN 55057

Opportunity Reboot Initiative advancing economic 1651 Jefferson Parkway Suite opportunity for youth YouthBank Youth First

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(c)3 9.000 The Kev Turf Northfield Union of Youth Inc. 41-1812234 PO Box 481 Northfield, MN 55057 NorthPoint Health & Wellness 41-6005801 501(c)3 117.362 Better Together Center Hennepin prevent 1313 Penn Avenue North adolescent pregnancy Minneapolis, MN 55411 and promote healthy

youth development

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 41-0916478 501(c)3 50.000 Pillsbury United Communities Somalı Youth 125 West Broadway Ave N Development Fund Minneapolis, MN 55411 Planned Parenthood Minnesota 41-0948382 501(c)3 84.000 Better Together North Dakota South Dakota Hennepin prevent 671 Vandalia Street adolescent pregnancy Saint Paul, MN 55114 and promote healthy

youth development

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 26-1209294 501(c)3 20.000 Boys of Hope

Glitch

Power of People Leadership Institute 600 - 18th Avenue North Suite

61,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

41-1916337

Minneapolis, MN 55411

One Main St SE Suite 600 Minneapolis, MN 55414

Propel for Nonprofits

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Youth

Community Food Project

Propel for Nonprofits One Main St SE Suite 600 Minneapolis, MN 55414	41-1916337	501(c)3	26,000		Somalı Youth Development Fund
Rainbow Research	41-1326460	501(c)3	2,545		Nutrition Program and

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Kaindow Kesearch 621 West Lake Street Suite

Minneapolis, MN 55408

300

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Redeemer Center for Life 41-1912560 501(c)3 30.000 Capacity Building,

12,154

Systems Change,

YouthBank

YouthBank

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

1800 Glenwood Ave N

626 Selby Avenue Saint Paul, MN 55104

Minneapolis, MN 55405

Rondo Community Land Trust

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 41-1500773 501(c)3 26.910 Saint Paul Neighborhood Capacity Building and Network Systems Change

Teacher Pathway

Program

26.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

550 Vandalia Street Suite 224
Saint Paul, MN 55114
Sanneh Foundation

2090 Conway Street

Saint Paul, MN 55119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Science Museum of Minnesota 41-0706172 501(c)3 20.000 Empowering Youth As 120 West Kellogg Boulevard Consultants

Saint Paul, MN 551021202 Search Institute 41-0811842 501(c)3 461.438

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55413

Opportunity Reboot 3001 Broadway Street NE ladvancina economic Suite 310 opportunity for youth

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ladvancina economic

opportunity for youth

-					
Shanta Link	46-5269248	501(c)3	25,000		Capacity Building
1821 University Ave Suite 153					
St Paul, MN 55104					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

205 W 2nd St Suite 101

Duluth, MN 55802

SOAR Career Solutions 41-1449179 501(c)3 188,554 Opportunity Reboot

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance Somalı American Parent 26-3120451 501(c)3 56.000 Rajo Means Hope Accociation

1433 E Franklin Ave Suite 10 Minneapolis, MN 55404					
Somalı Community Resettlement of Olmsted County	31-1668255	501(c)3	75,000		Young Somalı Stars

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1312 1/2 7th Street NW 206 Rochester, MN 55901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ı Youth

Youth Urban Tennis

Fund

Somalia Rebuild Organization 101 N BROADWAY Rochester, MN 55906	46-1751962	501(c)3	30,000		Somali Youth Development Fund

13,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Paul Urban Tennis Program 41-1725010

1188 Hubbard Avenue

Saint Paul, MN 55104

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Street Soccer Twin Cities 47-2724406 501(c)3 25.000 Street Soccer Twin 2423 25th Ave S Cities Minneapolis, MN 55406 Suicide Awareness Voices of 41-1702239 501(c)3 550 Sponsorship Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8120 Penn Avenue South Suite

Bloomington, MN 55431

470

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Internship

Tamales y Bicicletas 1501 East Lake Street Minneapolis, MN 55407	27-3257910	501(c)3	25,000		Urban Solution to Pollution
Tasho Community Solutions	47-2815218	501(c)3	10,000		Preparing for Life

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55408

2940 Pillsbury Ave S Suite 135

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Tennis & Education Inc. 41-1965977 501(c)3 13.500 Youth Urban Tennis 100 Federal Drive Fund

Saint Paul, MN 55111

Twin Cities Mobile Jazz Project 46-2541808 501(c)3 77,200

Out of School Jazz Fund Street Sute 318

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Saint Paul, MN 55102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applıcable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Urban Boatbuilders Inc 41-1831598 501(c)3 225 YouthBank 2200 University Avenue West

Saint Paul, MN 55114					
Urban Children and Youth Education Center 3900 Jackson Street NE Suite	45-5313082	501(c)3	60,000		Youth Entrepreneurship

20

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55421

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Urban Roots 41-0975429 501(c)3 20,000 Healthy Food and 463 Maria Avenue Families

Sponsorship

555

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Paul, MN 55106 USTA Northern

1001 W 98th St Suite 101 Bloomington, MN 55431 41-1675510

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Voices for Racial Justice 2525 E Franklin Ave Suite 301 Minneapolis, MN 55406	41-1750116	501(c)3	20,000		Capacity Building
We Impact	47-5546039	501(c)3	20,000		Sponsorship

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3620 East 26th Street Minneapolis, MN 55406

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 41-1820991 501(c)3 25.000 Youth LEAP WE WIN Institute Inc

3751 17th Avenue South Minneapolis, MN 55407 WellShare International 41-1397062 501(c)3 20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

The Young Achievers 122 West Franklin Avenue Suite 510 Minneapolis, MN 55404

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-7447142 501(c)3 500 YouthBank West Side Community

Organization 209 Page Street West Saint Paul, MN 55107					
World Savvy 1304 University Avenue NE	45-0473508	501(c)3	75,027		Youth Engagement Fellowship Fund

Suite 305 305

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55413

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 56-2536131 501(c)3 6.000 vouthrive Sponsorship 615 First Ave NE Suite 155 Minneapolis, MN 55413 YWCA of Minneapolis 41-0693891 501(c)3 25.000 Better Together 1130 Nicollet Mall Hennepin prevent Minneapolis, MN 55403 adolescent pregnancy and promote healthy

youth development

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance Brooklyn Bridge Alliance for 41-6008804 509(a)1 39,000 Expanded Learning Youth Systems

6150 Summit Drive North Suite 200 Brooklyn Park, MN 55430					o, stemo
University of Minnesota Foundation 105 Peters Hall 200 SE Oak Street 300	41-6042488	509(a)1	50,000		Ka Joog 4-H Youth Development STEAM Clubs

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55455

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance nakers

Meals for youth

Bolder Options 2100 Stevens Ave	41-1909408	501(c)3	19,920		1	Creating Changemak
Minneapolis, MN 55404						_

3.727

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Community Bridge

2400 Park Avenue South Minneapolis, MN 55404 46-2308775

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance HealthFinders Collaborative Inc. 20-1805262 501(c)3 4.083 YouthBank

PO Box 731 Northfield, MN 55057			.,		
Saint Paul Central High School Foundation	41-1586189	501(c)3	10,000		Central Ho Philando (

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

St Paul, MN 55108

Honors -Castile PO Box 8082 Scholarship

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Youth Pro Fitness LLC 46-0614174 20.550 HS-YoPro Fitness and 16526 West 78th Street Box Nutrition Fund

Healing Project

16526 West 78th Street Box
150
Eden Prairie, MN 55346

Kwanzaa Community Church 27-0031853 501(c)3 20,000 21st Century Academy

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PCUSA

3700 Bryant Avenue North Minneapolis, MN 55412

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 41-6005375 Govt Entity 7.603 THE Council City of Minneapolis 250 S 4th St Rm 510

State of MN-Department of Administration Building 50 Sherburne Avenue

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Saint Paul, MN 55155

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance University of Minnesota 20-0648020 Govt Entity 97.838 YouthBank

Performance social.

racial, and economic

inequalities in Minnesota

Change A Man Media LLC	81-1515680	4,000		Performance
300 Washington Ave SE Suite 209 Minneapolis, MN 55455		·		

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 392794

Snellville, GA 30039

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance youth ation Reform

Pint Size Catering LLC 2700 Douglas Drive North Crystal, MN 55422	42-4270534		71,163		Meals for y
Navigate MN 2525 East Franklin Avenue	45-3808452	501(c)3	15,000		Immigratio

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Suite 300 300

Minneapolis, MN 55406

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Northfield Public Schools 41-6008327 Govt Entity 13.690 Northfield Public Schools (Northfield High School) Awards 1400 Division Street South

Better Together

Hennepin prevent

adolescent pregnancy and promote healthy youth development

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Govt Entity

Northfield, MN 55057

Richfield Public Schools

7001 Harriet Ave South

Richfield, MN 55423

41-6001404

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 30-0368292 501(c)3 25.000 African Immigrants Community Youth Civic Engagement & Leadership

Services 1933 13th Avenue South Minneapolis, MN 55404

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CKC Good Food 41-1565932 450.372 Meals for vouth

PO Box 431419 Minneapolis, MN 55443

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

41-1996751 951 Dunn & Semington LLC Youthprise annual 5250 West 73rd Street Suite F Edina, MN 55439

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

StPaul, MN 55125

Isummit Higher Ground Academy 41-1886212 501(c)3 25,000 SomaliGirlsRock 1381 Marshall Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance New Rules GBC 81-1463170 10.675 Capacity Building

2015 North Lowry Avenue Minneapolis, MN 55411

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Hopkins, MN 55393

Vent-A-Hood of the Twin Cities 20-2764746 4,000 Humans Helping 101 Shady Oak Road Humans

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 20-3171950 501(c)3 24.000 MNYou Youth Garden Willmar Downtown Development 320 4th St Willmar, MN 56201

Membership

3.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Metropolitan Alliance of

Connected Communities 414 South 8th St Minneapolis, MN 55404 41-1959688

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance New Vision Foundation 81-2114563 501(c)3 15.000 Somalı Youth 1808 Riverside Avenue Suite Development Fund

210 Minneapolis, MN 55454					•
Somalı American Women Action Center 2910 Pillsbury Avenue Suite	82-0743165	501(c)3	1,000		Sewing 4 Living

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

432

Minneapolis, MN 55408

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 47-1005386 501(c)3 25.000 Somali Community Barwaago Youth empowered and Organization Inc Leadership

227 Fast Main St Suite 220 Mankato, MN 56001 Somalı Family and Youth 26-4646941 501(c)3 25.000 Expand SOMFAM's Youth Programs

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Development Center 2400 Park Ave S Minneapolis, MN 55404

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance City of St Paul 41-6005521 Govt Entity 15.000 YouthBank Grants 15 West Kellogg Blvd 280 City Payable Hall

YouthBank Grants

Pavable

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Paul, MN 55102

YMCA of the Greater Twin

2125 East Hennepin Avenue Minneapolis, MN 55413

Cities

45-2563299

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Opportunity Reboot

ladvancina economic

opportunity for youth

Pilgrim Baptist Church	41-0843353	501(c)3	1,350		Boys to Men Voices to
732 W Central Avenue					Power event with
Minneapolis, MN 55104					Irreducible Grace

35,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Govt Entity

DEED Financial Services

Saint Paul, MN 551014447

PO Box 4447

recipients cash grant non-cash assistance FMV, appraisal, other) Art Collective 450 Youth Stipends

(d)Amount of

(e)Method of valuation (book,

(f)Description of non-cash assistance

Arts Fellow	7	22,765		Youth Stipends
East African Youth at Work youth employment	42	1,470		Stipends for youth participants

(c)Amount of

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(b) Number of

(a)Type of grant or assistance

Gift cards for youth participants 1,820 Stipends for youth researchers

Lady Bernice Brown Gregory CD/Book 1,000 Sponsorship

Release Community Event

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

Liberian Independence Day Festival	1	2,500		Sponsorship
Open Mic Appearance - Live Painting	1	200		Annual Summit
	,		 	

Sponsorship

Open Mic Appearance - Live Painting	1	200		Annual Summit
Rose Chu	1	53,325		Opportunity Reboot advancing econo

1,000

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

Partners with Youth Conference

Rose Chu 1 53,325 Opportunity Reboot advance for youth	ancing economic opportun

Rose Chu	1	53,325		Opportunity Repoot advancing economic opportunity
				for youth

				for youth
Panelist honorarium	1	150		Annual Summit

(a)Type of grant or assistance (b)Number of (c)Amount of (d)Amount of (e)Method of valuation (book, (f)Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other) Quality Collaborative Project 30.300 Technical Assistance

Quality Collaborative Project Training	3	7,500		Technical Assistance
COM Et- Chart Un		F 000		V 11 E 1

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

Quality collaborative rioject rialling		,,500		recrimed / bolotaries
S&M Fits Start Up	1	5,000		Youth Entrepreneurship

S&M Fits Start Up	1	5,000		Youth Entrepreneurship

Sam fits Start up	1	5,000		Youth Entrepreneurship
Tayla Canaulhina	4	114 420		Community Community Building

Tayo Consulting	1	114,438		Community Capacity Building

Tayo Consulting	1	114,438		Community Capacity Building
The Sanneh Foundation	1	1,500		Sponsorship

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

(f)Description of non-cash assistance

Youthprise annual summit

Blog posts

Kalpullı Ketzalcoaflıcue	1	20,000		yPAR
YESI Fund	1	3,000		Youth Entrepreneurship

600

6,000

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

Stipends

Youthprise Creator

efil	e GRAPHIC pr	rint - DO NOT PROCESS As Filed Data -	DLN: 93493	1770	07228
Schedule J		Compensation Information	OMB N	No 154	15-0047
(For	m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest			
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	2	2017	
		▶ Attach to Form 990.			
•	tment of the Treasury al Revenue Service	▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.		n to i	Public tion
	ne of the organiza	Employer is	dentification		
You	thprise	27-4126970	ı		
Pa	rt I Questi	ons Regarding Compensation			
				Y	es No
1a		opiate box(es) if the organization provided any of the following to or for a person listed on Form Section A, line 1a Complete Part III to provide any relevant information regarding these items			
		s or charter travel Housing allowance or residence for personal use			
	_	r companions \square Payments for business use of personal residence			
		Inification and gross-up payments			
	LI Discretion	nary spending account			
b		exes in line 1a are checked, did the organization follow a written policy regarding payment or reimb all of the expenses described above? If "No," complete Part III to explain		ь	
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all ees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	_ :	2	
	directors, truste	ees, officers, including the CEO/Executive Director, regarding the items checked in line 1a			
3		If any, of the following the filing organization used to establish the compensation of the CEO/Executive Director Check all that apply Do not check any boxes for methods			
	_	ed organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	П с	Window consists and analysis of			
		eation committee			
		of other organizations Approval by the board or compensation committed.	ee		
4	During the year	r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organiza			
	related organiza	ation			
а	Receive a sever	rance payment or change-of-control payment?	4	а	No
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?			b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III				·c	No
	If les to any t	of lines 4a-c, list the persons and provide the applicable amounts for each item in rait in			
	Only 501(c)(3	3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any contingent on the revenues of			
а	The organization	n?	5	а	No
b	Any related orga		5	b	No
	•	e 5a or 5b, describe in Part III			
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any contingent on the net earnings of			
а	The organization	n?		а	No
b	Any related orga		6	b	No
_	•	e 6a or 6b, describe in Part III			
7		ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed described in lines 5 and 67 If "Yes," describe in Part III		7	No
8		unts reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe		3	No
9	If "Yes" on line 3 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure described in Regulations	section	,	140
Ear I	Danarwark Badı	uction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Sc	chedule 1 (E	rm 0	2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (D) Nontaxable (C) Retirement and (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 Wokie Weah 126,490 (i) Ω 7.967 23.252 157,709 President 0 (ii)

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

efile GRAPH	IIC print	- DO NOT PROCESS As Filed Data -	DLI	N: 93493177007228	
SCHEDUL (Form 990 or EZ)	r 990- Freasury	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.		2017 Open to Public Inspection	
Name of the org Youthprise		plemental Information	Employer ider 27-4126970	ntification number	
Return Reference		Explanation			
Form 990, Part VI, Section B, line 11b	The president, chief financial officer, and finance committee review the draft return, pro viding any comments and suggestions. The final draft is provided to all voting board membe rs prior to filing.				

990 Schedule O, Supplemental Information Return Explanation

ing on anything that may be conflict of interest

Reference	
	Annually, the adult board of directors fill out a conflict of interest form. The governance
Part VI,	e committee ensures that all board members fill out the form and evaluates any matters tha
Section B,	t may be reported. A transaction involving a conflict of interest may be approved by the b
line 12c	oard of directors Board members are requested to recuse themselves from discussing or vot

Return Explanation
Reference

990 Schedule O, Supplemental Information

line 15a

Form 990,
Part VI,
Section B.

Youthprise retains a third party human resources firm to conduct salary comparison researc
h of positions within organizations similar to Youthprise

Return
Reference

Explanation

Explanation

990 Schedule O, Supplemental Information

line 19

Form 990,
Part VI,
Section C.