## Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Inspection

(Rev. January 2020) Department of the Treasury
Internal Revenue Service

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

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

Open to Public

OMB No. 1545-0047

<u>A</u>	ror the	e 2019 calendar year, or tax year beginning 0010 1, 2019 and	ending M	AI 31, 2020						
В	Check if applicabl	C Name of organization		D Employer identific	cation number					
	Addre chang	Young Voices								
	Name chang	Doing business as	15							
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r					
	Final return	1342 Elorida Avo NW		202-350-						
	termin			G Gross receipts \$	479,023.					
	Amen			H(a) Is this a group re						
	return Applic tion			for subordinates						
	tion pendii									
_										
			or 527	1	list. (see instructions)					
		https://www.young-voices.com/	1	H(c) Group exemption						
		organization: X Corporation Trust Association Other	<b>L</b> Year	of formation: ZUIO N	1 State of legal domicile: DC					
Р	art I	Summary								
ø	1	Briefly describe the organization's mission or most significant activities: ${ t To}$ ${ t C1}$	<u>ultiva</u>	te the next	generation					
anc		of thought leaders for liberty in policy	, jour	nalism, and	academia.					
ž	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	ssets.					
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	4					
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3					
es	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	5					
ζĖ		Total number of volunteers (estimate if necessary)			50					
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
٩		Net unrelated business taxable income from Form 990-T, line 39			0.					
		,		Prior Year	Current Year					
Revenue	8	Contributions and grants (Part VIII, line 1h)		367,951.	478,986.					
	9	Program service revenue (Part VIII, line 2g)		0.	0.					
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	37.					
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		367,951.	479,023.					
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		18,450.	29,403.					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
"	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		187,518.	277,799.					
Expenses	160			0.	0.					
Sen	loa	Professional fundraising fees (Part IX, column (A), line 11e)	46		0.					
X	_ D	Total fundraising expenses (Part IX, Column (D), line 25)	<del></del>	72,966.	94,238.					
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		278,934.	401,440.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		89,017.	77,583.					
<u>_ </u>	19	Revenue less expenses. Subtract line 18 from line 12								
Net Assets or			Re	ginning of Current Year	End of Year					
SSE	20	Total assets (Part X, line 16)		204,880.	285,743.					
et A	21	Total liabilities (Part X, line 26)		4,016.	7,296.					
	22	Net assets or fund balances. Subtract line 21 from line 20		200,864.	278,447.					
	art II	Signature Block								
	-	lties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is					
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer							
		C20=		07/27/2	20					
Sig	ın	Signature of officer		Date						
He	re	Casey Given, Executive Director								
		Type or print name and title		\	DTIN					
		Print/Type preparer's name Preparer's signature	off	Date Check	PTIN					
Pai	d	Lori A. Collingsworth	WW	7/27/20 if self-employed	P00639819					
Pre	parer	Firm's name Rogers & Company FLLC		Firm's EIN	58-2676261					
Use	Only	Firm's address 8300 Boone Boulevard, Suite 600								
_		Vienna, VA 22182		Phone no. (7	03) 893-0300					
Ма	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					

Form **990** (2019)

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To cultivate the next generation of thought leaders for liberty in
	policy, journalism, and academia.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	
	Contributor Program:
	Young Voices' premier project provides pro bono op-ed editing,
	pitching, and broadcast interview placement services to talented
	writers ages 18-35 knowledgeable in the classical liberal tradition.
	Our fiscal year 2020 was the most successful to date for the program,
	successfully placing 454 articles and 229 broadcast interview hits
	(e.g. radio, TV, podcast, etc.) in noted outlets including Fox News,
	USA Today, and the Wall Street Journal.
4b	(Code:) (Expenses \$ 60 , 000 • _ including grants of \$ 29 , 403 • _) (Revenue \$)
	Policy Fellowships:
	Young Voices offers an opportunity for select writers in our program to
	take a deep-dive on specific policy issue areas. This year, we
	successfully completed four such policy fellowships on the issue areas
	of technology, foreign policy, education, and consumer freedom. 12
	fellows were paired up with think tank mentors with the expectation of
	producing tailored media hits (i.e. op-eds, TV, radio, podcasts)
	communicating the importance of preserving free markets and individual
	rights.
4c	(Code:         ) (Expenses \$         including grants of \$         ) (Revenue \$         )
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses > 265,763.

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# Form 990 (2019) Young Voices Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		77	
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		<del></del>
D	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	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			Х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

# Form 990 (2019) Young Voices Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	<u> </u>		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?	200		<del></del>
·	"You " complete Schodule   Part II/	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
32	Colonda N. Dort II	32		х
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		<del></del>
J-4		34		Х
35.5		35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	00a		<del></del>
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		
50	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-30		
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<del>  "</del>		<del></del>
30	Note: All Form 990 filers are required to complete Schedule O	38	х	1
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	_ 30		
	Check if Schedule O contains a response or note to any line in this Part V			
	Shook is dorindade di containe a response of flote to any line in this flat.		Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 16		100	110
	Enter the number reported in Box 3 of Form 1096. Enter 40-11 not applicable 1a 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	Х	
	(garnoung) withings to prize withers:	IC	22	

# Form 990 (2019) Young Voices Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return2a	5						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O							
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	b If "Yes," enter the name of the foreign country ▶							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			_ v				
	any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	١.,						
_	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	o		Х				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor		-					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b						
C		7c		X				
d	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year 7d	70						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х				
f								
g								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.							
р	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans 13b	_						
	Enter the amount of reserves on hand	44-		X				
				1				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b						
15	excess parachute payment(s) during the year?	15		X				
	If "Yes," see instructions and file Form 4720, Schedule N.	13		<u> </u>				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х				
	If "Yes," complete Form 4720, Schedule O.	10						
	1 100, complete i diffi 41/20, concedulo o.		-					

Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 3 **b** Enter the number of voting members included on line 1a, above, who are independent \_\_\_\_\_ 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? X 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed  $\triangleright DC$ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Own website Another's website Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records Casey Given, Executive Director - 202-350-1381 1342 Florida Ave, NW, Washington, DC 20009-4808

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

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

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

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

See instructions for the order in which to list the persons above.

(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than	one	Reportable	Reportable	Estimated
	hours per	box				is bot	h an	compensation	compensation	amount of
	week	$\vdash$	Jer ar	lu a u	recit	)/ ii us	lee)	from	from related	other
	(list any hours for	lirecto				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	3e or 0	stee			ısatec		(W-2/1099-MISC)	(***2/1099*****100)	organization
	organizations	trust	al tru		yee	educ		,		and related
	below	Individual trustee or director	Institutional trustee	Je.	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Inst	Officer	Key	Hig	Former			
(1) Jared Meyer	1.00	١		l						
President	1 00	Х		Х				0.	0.	0
(2) Scott Barbee	1.00	١		l						
Vice President	40.00	Х		Х				0.	0.	0
(3) Casey Given	40.00	١		l				E4 E00		
Treasurer/ Executive Director	1 00	Х		Х				71,783.	0.	0
(4) Fred Roeder	1.00	,,		,,					0	•
Secretary	1 00	Х		Х				0.	0.	0
(5) Dan Grossman	1.00	٠,,							0	0
Trustee		Х						0.	0.	0
		-								
		-								
		1								
		1								
		1								
		1								
		1								
		1								
		1								
						t				
		1								
		1								
		1	ı	ı	I	ı	ı	I		

(A)	(B)	(B) (C)						(D)	(E)			(F)	
Name and title	Average	(do not check					one	Reportable	Reportable compensation		Es	timate	:d
	hours per	box	x, unless person is bot ficer and a director/trus		n an	compensation		nount (			of		
	week (list any	$\vdash$				ii us	100)	from	from related			other	
	hours for	director				_		the organization	organizations (W-2/1099-MISC	, l		pensa om the	
	related	96 Or (	stee			ısatec		(W-2/1099-MISC)	(***-2/1099-181100	"		anizati	
	organizations	trust	al tru		yee	educ		,			•	d relate	
	below	Individual trustee or	Institutional trustee	ser	Key employee	Highest compensated employee	ner				orga	nizatio	วทร
	line)	lh di	lnst	Officer	Key	Hig	For			+			
		1											
		-											
		$\frac{1}{2}$											
1b Subtotal							<b>&gt;</b>	71,783.		0.			0.
c Total from continuation sheets to F	Part VII, Section A						<b>&gt;</b>	0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	71,783.		0.			0.
2 Total number of individuals (including compensation from the organization		nose	liste	ed at	OOV	e) wh	io re	eceived more than \$100	,000 of reportable				0
												Yes	No
3 Did the organization list any former of			кеу е	empl	loye	e, or	hig	hest compensated emp	loyee on		_		v
line 1a? If "Yes," complete Schedule											3		X
4 For any individual listed on line 1a, is													Х
<ul><li>and related organizations greater tha</li><li>Did any person listed on line 1a recei</li></ul>											4		
5 Did any person listed on line 1a recei rendered to the organization? If "Yes,	•				•		elati	ed organization or indivi		- 1	5		Х
Section B. Independent Contractors	complete conteau		0. 00	. О р	0.0								
1 Complete this table for your five high										ensa	ation f	rom	
the organization. Report compensation	A)	ear e	eriai	ng w	VILIT	or w	LI III	(B)	year.		(C	;)	
Name and bus	siness address	NC	ONE	3				Description of s	ervices	Co	omper	nsatio	า
							+						
							+						
2 Total number of independent contract		not lii	mite	d to		_	sted	above) who received m	nore than				
C100 000 of commencedicus fueros the	organization -				(	)							
\$100,000 of compensation from the											(	990 (2	

932009 01-20-20

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues ..... 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 478,986. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1g \$ 478,986. h Total. Add lines 1a-1f ...... **Business Code** Program Service Revenue 2 a f All other program service revenue ..... g Total. Add lines 2a-2f Investment income (including dividends, interest, and 37. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses ..... 7b c Gain or (loss) \_\_\_\_\_ 7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses \_\_\_\_\_ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold ..... 10b **c** Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d ..... 479,023. 0. Total revenue. See instructions 12

# Form 990 (2019) Young Voices Part IX Statement of Functional Expenses

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

3601	Check if Schodulo O contains a respon			присто сошти (лу.	
Do	Check if Schedule O contains a respor not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	24 462	24 462		
•	individuals. See Part IV, line 22	24,463.	24,463.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	4,940.	4,940.		
	individuals. See Part IV, lines 15 and 16	4,940.	4,940•		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	75,950.	17,568.	12,619.	45,763.
6	trustees, and key employees  Compensation not included above to disqualified	75,550.	17,300.	12,013.	43,703
U	persons (as defined under section 4958(f)(1)) and				
	paragna described in section 40E0(a)(2)(D)				
7	Other salaries and wages	177,181.	177,181.		
8	Pension plan accruals and contributions (include	, , ,	,		
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,899.	1,203.	232.	464.
10	Payroll taxes	22,769.	17,580.	1,434.	3,755.
11	Fees for services (nonemployees):	,	,		, , , , , , , , , , , , , , , , , , ,
	Management				
	Legal				
	Accounting	10,199.		10,199.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	4,750.	4,750.		
12	Advertising and promotion	1,189.			1,189.
13	Office expenses	6,264.	2,354.	3,903.	7.
14	Information technology	11,185.	3,610.	4,499.	3,076.
15	Royalties				
16	Occupancy	20,371.	4	20,371.	
17	Travel	22,621.	6,729.	171.	15,721.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	14 656	F 205		0 054
19	Conferences, conventions, and meetings	14,656.	5,385.		9,271.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,259.		2,259.	
23	Insurance Other expanses, Itamize expanses not severed	4,409.		4,409.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	State Registration Fees	744.		744.	
b					
c					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	401,440.	265,763.	56,431.	79,246.
26	Joint costs. Complete this line only if the organization	-	-	-	<u>-</u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	0.01.00.00				Earm <b>990</b> (2010)

## Form 990 (2019) Part X Balance Sheet

	LA	Balance Sheet				
		Check if Schedule O contains a response or	note to any line in this Part X		······	
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		32,074.	1	68,744.
	2	Savings and temporary cash investments			2	67,176.
	3	Pledges and grants receivable, net			3	149,823.
	4	Accounts receivable, net		4		
	5	Loans and other receivables from any curren				
		trustee, key employee, creator or founder, su				
		controlled entity or family member of any of t			5	
	6	Loans and other receivables from other disquared				
		under section 4958(f)(1)), and persons descr			6	
S	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ä	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	ь	Less: accumulated depreciation	<del> </del>		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, lin			12	
	13	Investments - program-related. See Part IV, li		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must e		004 000	16	285,743.
	17	Accounts payable and accrued expenses		1 01 6	17	7,296.
	18	Grants payable		18	·	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple			21	
ű	22	Loans and other payables to any current or f				
Liabilities		trustee, key employee, creator or founder, su				
abil		controlled entity or family member of any of t			22	
Ξ	23	Secured mortgages and notes payable to un			23	
	24	Unsecured notes and loans payable to unrel			24	
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on li				
		of Schedule D	, .		25	
	26	Total liabilities. Add lines 17 through 25		4,016.	26	7,296.
		Organizations that follow FASB ASC 958,				
ces		and complete lines 27, 28, 32, and 33.				
lan	27	Net assets without donor restrictions		100,364.	27	165,727.
Ва	28	Net assets with donor restrictions		100,500.	28	112,720.
pur		Organizations that do not follow FASB AS				
Ę		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fur	nds		29	
set	30	Paid-in or capital surplus, or land, building, o			30	
As	31	Retained earnings, endowment, accumulated			31	
Net	32	Total net assets or fund balances		200,864.	32	278,447.
	33	Total liabilities and net assets/fund balances		204,880.	33	285,743.

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				Ш	
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments	1 2 3 4 5 6 7 8	47 40 7	9,0 1,4 7,5 0,8	<u>40.</u> 83.	
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10 Pa	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  rt XII Financial Statements and Reporting	10		8,4	<u>47.</u>	
	Check if Schedule O contains a response or note to any line in this Part XII					
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule  Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	No	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis		2b		X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?		2c		Х	
За	If the organization changed either its oversight process or selection process during the tax year, explain on Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Act and OMB Circular A-133?	ngle Audit	3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why on Schedule O and describe any steps taken to undergo such audits	red audit	3b			

Form **990** (2019)

#### **SCHEDULE A**

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Young Voices 81-2593815 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		216,023.	300,095.	367,951.	478,986.	1,363,055.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3		216,023.	300,095.	367,951.	478,986.	1,363,055.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						653,551.
	Public support. Subtract line 5 from line 4.						709,504.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4		216,023.	300,095.	367,951.	478,986.	1,363,055.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources					37.	37.
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.)						
11	<b>Total support.</b> Add lines 7 through 10						1,363,092.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stor	here	·····				►X
	ction C. Computation of Publ						
	Public support percentage for 2019 (					14	%
	Public support percentage from 2018					15	%
16a	33 1/3% support test - 2019. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	<b>stop here.</b> The organization qualifies						
b	33 1/3% support test - 2018. If the						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	•	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	t - 2018. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	ımstances" test, cl	neck this box and	<b>stop here.</b> Explair	n in Part VI how the	
	organization meets the "facts-and-cire	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a. 16b. 17a. or 17b	o, check this box a	and see instruction	s 🕨 📗

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047
2019

Open to Public Inspection

Name of the organization

Young Voices

Employer identification number 81-2593815

Form 990, Part VI, Section A, line 4:

The Board of Directors amended the Bylaws to require a minimum of two board meetings per year from the previous requirement of four.

Form 990, Part VI, Section B, line 11b:

The Federal Form 990 is prepared by an independent public accounting firm.

A draft is provided first to the Executive Director for review. Any edits are then incorporated into the form. Upon approval of the final draft, the 990 is then distributed to each member of Board of Directors via hard copy or email at least 10 days before submission to the IRS.

Form 990, Part VI, Section B, Line 12c:

Each director, principal officer and member of a committee with governing board delegated powers shall annually sign a statement which affirms such person: (a) Has received a copy of the conflict of interest policy, (b) Has read and understands the policy, (c) Has agreed to comply with the policy, and (d) Understands that the corporation is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

Form 990, Part VI, Section B, Line 15:

The Executive Director current compensation was approved by a private vote of of the Board of Directors with the Executive Director excluded from the meeting and abstaining from voting.

Compensation of all Young Voices' staff is approved annually by the Board

Young Voices	81-2593815
of Directors in the fiscal year budget.	
Form 990, Part VI, Section C, Line 19:	
Voing Voices' governing documents, conflict of interest	noligy and
financial statements are made available to the public on	our website at
https://www.young-voices.com/donate/	