Form **990**

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

Open to Public Inspection

For the 2012 calendar year, or tax year beginning . 2012, and ending Check if applicable: D Employer Identification Number Address change National Center for Youth Law 94-2506933 405 14th Street, 15th Floor Oakland, CA 94612 Name change E Telephone number Initial return 510-835-8098 Terminated Amended return G Gross receipts \$ 3,855,287. F Name and address of principal officer: Application pending John O'Toole H(a) Is this a group return for affiliates? Yes H(b) Are all affiliates included?
If 'No,' attach a list. (see instructions) Same As C Above Yes Tax-exempt status X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or Website: ▶ www.youthlaw.org H(c) Group exemption number Form of organization: X Corporation Trust L Year of Formation: 1978 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: The National Center for Youth Law (NCYL) uses the law to improve the lives of poor children. NCYL works to ensure that low-income children have the resources, support, and opportunities they need for a healthy and productive future. 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)..... 16 **0**0 Number of independent voting members of the governing body (Part VI, line 1b)..... 16 Total number of individuals employed in calendar year 2012 (Part V, line 2a)..... 5 24 Total number of volunteers (estimate if necessary). 7a Total unrelated business revenue from Part VIII, column (C), line 12..... 7 a 0. **b** Net unrelated business taxable income from Form 990-T, line 34..... 0. **Current Year** 8 Contributions and grants (Part VIII, line 1h). 1,845,049 2,760,300. Revenue Program service revenue (Part VIII, line 2g)..... 361,770. 1,065,849. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 12,167. 14,728. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 7,521 10,588. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 226,507 3,851,465. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)..... 1,544,602 1,650,764. 16a Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) ► Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 621,124 589,351. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 2,165,726. 2,240,115. Revenue less expenses. Subtract line 18 from line 12..... 60,781. 1,611,350. End of Year **Beginning of Current Year** Total assets (Part X, line 16).... 1,499,315 3,167,768. Total liabilities (Part X, line 26)..... 21 109,238. 111,074.Net assets or fund balances. Subtract line 21 from line 20..... 1,390,077. 3,056,694 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here lahn Type or print name and title Print/Type preparer's name Adele Kaneda Paid self-employed P01664922 Preparer Firm's name Crosby & Kaneda, CPAs **Use Only** Firm's address 1611 Telegraph Ave Ste 318 Firm's EIN > N/A Oakland, CA 94612-2151 Phone no. (510)835-2727 May the IRS discuss this return with the preparer shown above? (see instructions).....

Form **8868**(Rev. January 2013)

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box..... If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only. All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print 94-2506933 National Center for Youth Law Number, street, and room or suite number, If a P.O. box, see instructions. Social security number (SSN) File by the due date for 405 14th Street, 15th Floor filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. Oakland, CA 94612 Enter the Return code for the return that this application is for (file a separate application for each return)..... Application Return Application Return Code is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 1041-A Form 990-BL 02 08 Form 4720 (individual) 03 Form 4720 09 04 10 Form 990-PF Form 5227 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of Hayden Lillien & Rob Kish FAX No. > Telephone No. ► 510-835-8098 If the organization does not have an office or place of business in the United States, check this box..... If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ▶ . If it is for part of the group, check this box . . . ▶ and attach a list with the names and ElNs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , 20 13 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 12 or _____, 20 ____, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return | |Final return Change in accounting period 3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a|\$ 0. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit..... 3 b | S 0. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

EFTPS (Electronic Federal Tax Payment System). See instructions.....

Ω.

Statement of Program Service Accomplishments Statement of Program Service Control in this Part III Statement of Program Service Control in this Part III Statement of grants of grants of statement of		990 (2012) National Center for Youth Law	94-2506933	Page 2
1 Briefly describe the organization's mission: See Schedule 0 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ7. If Yes, describe these new services on Schedule 0. If Yes, describe these changes on Schedule 0. If Yes, describe these changes on Schedule 0. If Yes, describe these changes on Schedule 0. See Schedule 0. See Schedule 0. 4 Exercise the organization organization expansion are reported to report the amount of grants and allocations to others, the trade expansion and reviews, if any, for each program service reported. See Schedule 0. See Schedule 0. (Expenses \$ 1,684,315, including grants of \$) (Revenue \$ 1,065,849.) See Schedule 0. (Expenses \$ including grants of \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$)	Par			
See Schedule 0				X
2 Did the organization undertake any significent program services during the year which were not listed on the prior Form 900 or 990-E27	1	Briefly describe the organization's mission:		
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27		See Schedule 0		
Form 990 or 990-EZ7				
Form 990 or 990-EZ7				
Form 990 or 990-EZ7				
If Yes,' describe these new services on Schedule 0. 3 Did the organization case conducting, or make significant changes in how it conducts, any program services?	2			
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 and section 6947(c)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 1,684,315_ including grants of \$) (Revenue \$) See_Schedule_O. 4b (Code:) (Expenses \$		·		
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4e Total program service expenses ► 1 684 315	40			
	4	e Total program service expenses ► 1 684 315		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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 1.	6		<u>x</u>
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 temporarily restricted endowments, permanent endowments, or 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.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	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.	11 b		х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	<u>x</u>	
	a 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? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? 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 assistance to individuals located outside the United States? 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 (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		х
	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
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II..... 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. X 22 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 X 23 Schedule J. 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25. 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?..... 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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 Х 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II. Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III. X 27 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): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV..... X 28a **b** A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV.*..... X 28b Х **28**c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M...... 29 X 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part L..... 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х 32 Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I..... X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 X 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 35a b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2..... 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2..... 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI...... Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

BAA

Form 990 (2012) National Center for Youth Law Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V			[
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2	4		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3 b		
4 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		х
b If 'Yes,' enter the name of the foreign country: ▶			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	-	Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		_
6 a 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		Х
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).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
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?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:	- 10		
a 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 10 b			
11 Section 501(c)(12) organizations. Enter:			U.
a 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.)			
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		<u> </u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	-		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q		_	X

Form 990 (2012) National Center for Youth Law 94-2506933 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 16 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?..... 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?..... 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... X Did the organization become aware during the year of a significant diversion of the organization's assets? . . 5 X Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?.... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a **b** Each committee with authority to act on behalf of the governing body?..... X 86 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates?..... 10a 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 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?... X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.....See. Schedule O X 120 13 Did the organization have a written whistleblower policy?..... X 13 14 Did the organization have a written document retention and destruction policy?..... X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official. . See. Schedule . Q X 15 a X 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a X b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O

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

Check if Schedule O contains a response to any question in this Part VII.

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

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

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

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

				(0	;)					-
(A) Name and Title	(B) Average hours per week (list	one be	x, un	not	check	c more t n is bot or/truste	h an e) ——	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Peter B. Edelman	2									
President	0	Х		Х				0.	0.	0.
(2) Terrence Lee Hancock Vice President	$-\frac{2}{0}$	x		Х				0.	0.	0.
(3) Christopher Wu	2		П				Т			
Secretary	0	x		Х				0.	0.	0.
(4) James D. Weill	2									,
Treasurer	0	X		Х				0.	0.	0.
(5) Victoria L. Boesch	2		П				П			
Board Member	0	X					L.	0.	0.	0.
(6) Alexander L. Brainerd	2									
Board Member	0	Х						0.	0.	0.
7 David Brown	2	1								
Board Member	0	Х						0.	0.	0.
(8) Annette Carnegie	2	1								
Board Member	0	X					_	0.	0.	0.
_(9) Judith Gold	2									
Board Member	0	Х			Ш			0.	0.	0.
(10) James W. Head	2	1								
Board Member	0	X		Ш				0.	0.	0.
(11) Dr. Charles E. Irwin	2	1								
Board Member	0	Х						0.	0.	0.
(12) Walter P. Loughlin	2	ļ						_ '	_	
Board Member	0	Х	$ldsymbol{ldsymbol{ldsymbol{ldsymbol{eta}}}$				_	0.	0.	0.
(13) John D. MacIntosh	2	ļ							_	
Board Member	0	Х		\vdash			_	0.	0.	0.
(14) Mary E. McCutcheon	2	ļ			•				_	_
Board Member	0	X		L				0.	0.	0.

Part VII Section A. Officers, Directors, Trus		Key	Em			es,	and	d Highest Com	pensated Empl	oyee	5 (COI	nt)
	(B)			(0	•							
(A) Name and title	Average hours per	I box	, unte	55 D6	erson	than is bot or/trus	h an l	(D) Reportable compensation from	(E) Reportable compensation from	E	(F) Estimated	l her
	week (list any hours	or director	135	오	<u>7</u>	Highest compensated employee	For	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	сол	npensation	on
	for related	lividu direc		Officer	Key employee	hest ploye	mer			ar	ganizatio nd related	d
	organiza - tions	tor to	ᆲ) Sol	ë				org	janization	ns
	below dotted	Selsi	Tust		8	l ens						
	line)	"	8			<u>\$</u>						
(15) Hector Javier Preciado	2_		Н									
Board Member	0	X						0.	0.			0.
(16) Lori A. Schechter	2		П									
Board Member	0	X	Ш					0.	0.			0.
(17) John O'Toole	38											
Executive Dir.	0			X	_			168,879.	0.		37,8	<u>353.</u>
(18) Hayden Lilien	38											
Dir. of Finance	0		\vdash	X	\vdash		\vdash	93,027.	0.		9,0	041.
(19) Michael Harris Senior Attorney	38	-				X		118,110.	0.		25 (202
(20) William Grimm	38	\vdash				_	-	110,110.	0.		25,5	992.
Senior Attorney	1-20	1				X		122,671.	0.		27 (987.
(21)	۱Ť		Н			41	Н	122,071.			2173	
	1	1										
(22)			П				П					
	1		Ш									
(23)	J											
	1		Щ				$oxed{oxed}$					
(24)												
(OE)			Н				L					
(25)		-										
1 b Sub-total	<u>!</u>		II		l	L	<u> </u>	502,687.	0.	-	100,8	272
c Total from continuation sheets to Part VII, Section	n A							0.	0.		.00,0	0.
d Total (add lines 1b and 1c).								502,687.	0.		100,8	
2 Total number of individuals (including but not limited to							ved		0 of reportable comp			
from the organization > 3												
											Yes	No
3 Did the organization list any former officer, director	or or trus	tee,	key	em	ploy	ee, c	or hi	ghest compensate	ed employee			
on line 1a? If 'Yes,' complete Schedule J for such										. 3		X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greater	reportable	e co	mpe	nsa	tion	and	oth	er compensation	from			
such individual						com	piet 	e Scriedule J IOI		. 4	Х	
5 Did any person listed on line 1a receive or accrue	compen	satio	n fro	om	any	unre	late	d organization or	individual			
for services rendered to the organization? If 'Yes,	' comple	te So	ched	lule	J fo	r suc	ch p	erson		. 5		X
Section B. Independent Contractors 1 Complete this table for your five highest compensations.	ated inde	anen	dont	COL	ntra	ctore	tha	t received more t	220 \$100 000 of			
compensation from the organization. Report compens	ation for	the ca	alend	dar	year	endi	ng v	vith or within the or	ganization's tax year		_	
(A)								(B)		_ ((C)	
Name and business addre	ess							Description of	of services	Compe	ensatio	on ———
								ļ -				
2 Total number of independent contractors (including bu	t not limi	ted to	o the	se I	ister	l abo	ve)	who received more	than			
\$100,000 in compensation from the organization							,					
	~											

Part VIII Statement of Revenue

	·	Check if Schedule O	contains a res	ponse to any questi		(B)		
					(A) Total revenue	Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR ANGUNTS	1 a	Federated campaigns		2/102.				
용립	b	Membership dues						
톲		Fundraising events						
5 ₹		Related organizations						
욹룷	е	Government grants (contributi	ons) 1e	33,157.				
59	f	All other contributions, gifts, of	grants, and					
물덩		All other contributions, gifts, q similar amounts not included						
절	g	Noncash contributions include	ed in Ins 1a-1f: 💲	27,391.				
ш	h	Total. Add lines 1a-1f			2,760,300.			
る				Business Code	Contract to the contract of the	4	2	2000
힕	2 a	Attorney fees			869,692.	869,692.		
핑	þ	<u>Contracts</u>			196,157.	196,157.		
8	C							
ᅈ	d							
桑	е	·						
홅	f	All other program service						
-	g	Total. Add lines 2a-2f			1,065,849.			
	3	Investment income (incother similar amounts)	aluding dividend	ls, interest and	15 255			15 255
	4	Income from investmen			15,255.			15,255.
- 1	5	Royalties						+
1	•	noyanos	(i) Real	(ii) Personal				
	6 a	Gross rents	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,				
		Less: rental expenses						
		: Rental income or (loss)						
		Net rental income or (lo	oss)			-		
		Gross amount from sales of	(i) Securities	(ii) Other				
	/ a	assets other than inventory.	3,295	i.				
		Less; cost or other basis	3,233					
		and sales expenses	3,822	2.				
	C	Gain or (loss)	-527					
	d	Net gain or (loss)			-527.	-527.		
	8 a	Gross income from fund	draising events					
3		(not including. \$						
		of contributions reporte						
OTHER REVEN		See Part IV, line 18						
Ē		Less: direct expenses.						
~	C	: Net income or (loss) fro	om fundraising	events				
	9 a	Gross income from gan See Part IV, line 19	ning activities.					
		Less: direct expenses.						
	C	: Net income or (loss) fro	om gaming acti	vities				
	10 a	Gross sales of inventor	y, less returns					
	L	and allowances						
		Less: cost of goods sol						
		: Net income or (loss) from Miscellaneous Reven		Business Code				
	11 -			pusiness C008	10 500	-		10 500
	ii a	<u>Miscellaneous</u>			10,588.			10,588.
	-							
		All other revenue						
		Total. Add lines 11a-11			10,588.			
		Total revenue. See inst			3,851,465.	1,065,322.	0	. 25,843.
					, OJI, 403.	1,000,344.	U	. 45,045.

Part IX Statement of Functional Expenses

	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a re	esponse to any questio			
Do 1 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	308,397.	167,677.	61,680.	79,040.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,060,609.	801,270.	154,474.	104,865.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	39,928.	28,482.	6,247.	5,199.
9	Other employee benefits	137,966.	98,415.	21,587.	17,964.
10	Payroll taxes	103,864.	74,089.	16,251.	13,524.
11	Fees for services (non-employees):				
	Management				
	Legal	16,381.	16,381.		
	Accounting	14,318.		14,318.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17.				
	Investment management fees				
ŧ	If Other, (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0)	200,761.	200,761.		
12	Advertising and promotion	16,111.	15,511.		600.
13	Office expenses	66,263.	49,313.	10,118.	6,832.
14	Information technology	17,208.	17,208.		
15	Royalties				
16	Occupancy	119,905.	85,532.	18,761.	15,612.
17	Travel	53,816.	53,816.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,614.	25,590.		4,024.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,683.	5,481.	1,202.	1,000.
23	_ : _ :	8,608.	8,608.		
24	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.)				
	Out of Pocket Expenses	27,391.	27,391.		
	Dues, licenses, service fees	8,790.	8,790.		
	Miscellaneous	2,502.			2,502.
	d				
. (All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,240,115.	1,684,315.	304,638.	251,162.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
BAA	SOP 98-2 (ASC 958-720)				Form 990 (2012)

Form 990 (2012)

BAA

Balance Sheet Check if Schedule O contains a response to any question in this Part X..... (B) End of year Beginning of year 1 699,599. 231,771 Cash - non-interest-bearing..... 2 Savings and temporary cash investments 94,475 252,834. 2 3 Pledges and grants receivable, net 351,766. 1,168,717. Accounts receivable, net 170,600 4 61,607. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.... 6 7 Notes and loans receivable, net 8 Inventories for sale or use..... Prepaid expenses and deferred charges..... 23,932. 9 31,106. 10a Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D...... 10a 120,320. 10 c 73,031. 74,727. 11 Investments – publicly traded securities..... 543,717. 11 872,547. 12 Investments – other securities. See Part IV, line 11..... Investments - program-related, See Part IV, line 11..... 13 13 14 Intangible assets 14 Other assets, See Part IV, line 11..... 15 15 8,327 8,327. 1,499,315. 16 Total assets. Add lines 1 through 15 (must equal line 34)..... 3,167,768. Accounts payable and accrued expenses..... 109,238. 17 111,074 18 18 Grants payable..... 19 19 Deferred revenue..... 20 20 Tax-exempt bond liabilities..... LIABILITIES 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L..... Secured mortgages and notes payable to unrelated third parties..... 23 23 24 Unsecured notes and loans payable to unrelated third parties..... 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 26 Total liabilities. Add lines 17 through 25. 109,238. 111,074. Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete N E T lines 27 through 29, and lines 33 and 34. 1,003,410 27 2,126,694. 27 Unrestricted net assets..... 28 28 Temporarily restricted net assets 386,667 930,000. 29 29 Permanently restricted net assets..... 0 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. FUND 30 Capital stock or trust principal, or current funds..... 31 Paid-in or capital surplus, or land, building, or equipment fund..... 31 32 32 Retained earnings, endowment, accumulated income, or other funds..... 33 Total net assets or fund balances..... 1,390,077 33 3,056,694. 3,167,768. 34 Total liabilities and net assets/fund balances 1,499,315 34

		94-25069	33	Pa	age 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,8	51,4	165.
2	Total expenses (must equal Part IX, column (A), line 25).	2	2,2	40,1	15.
3	Revenue less expenses. Subtract line 2 from line 1	3		11,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		90,0	
5	Net unrealized gains (losses) on investments.	5		55,2	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3 11	56,6	
Pai	t XII Financial Statements and Reporting		5,0	00,0	,,,,,,
	•				
	Check if Schedule O contains a response to any question in this Part XII.		******	_	لبعالي
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_	Yes	No
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revseparate basis, consolidated basis, or both:	viewed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
- 1	Were the organization's financial statements audited by an independent accountant?		. 2b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sebasis, consolidated basis, or both:	eparate			
	X Separate basis Consolidated basis Both consolidated and separate basis				
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	audit,	. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				

X

3a

3 b

Form 990 (2012)

3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?....

BAA

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

TEEA0112L 08/09/11

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

Name o	f the	organization		·					Employer	identificati	on number		
Nat.	io	nal Center for	Youth Law						94-25	06933			
Part	I	Reason for Publi	ic Charity Status	(All organizations	must c	omple	te this	part.)	See ir	nstructi	ons.		
The o	rga	nization is not a privat	te foundation because	e it is: (For lines 1 thro	ugh 11, (check o	nly one	box.)					
1		A church, convention	of churches or assoc	iation of churches desc	cribed in	section	170(b)((1)(A)(i).					
2	Г	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	.)								
3	Н	A hospital or a coope	rative hospital servic	e organization describe	d in sec	tion 170	(b)(1)(A)(iii).					
4	Н			in conjunction with a h					(b)(1)(A)(iii) . En	ter the hos	pital's	ı
	ш	name, city, and state	_=	·									
5		An organization operat	ed for the benefit of a molete Part II.)	college or university own	ed or ope	rated by	a gover	nmental	unit des	cribed in	section		
6	П	A federal, state, or lo	cal government or go	vernmental unit descri	bed in se	ection 1	70(b)(1)	(A)(v).					
7	X	in section 170(b)(1)(A	A)(vi). (Complete Par				ental uni	t or from	the gen	eral publi	ic described		
8	L	_		'0(b)(1)(A)(vi). (Complet									
9		related to its exempt fu unrelated business taxable (Complete Part III.)	unctions — subject to co e income (less section 51	re than 33-1/3% of its suppertain exceptions, and (2) 1 tax) from businesses acqu) no more uired by th	e than 33 e organiz	3-1/3% o ation afte	f its sup r June 30	port from , 1975. S	ind gross in gross in ee sectio r	receipts froi vestment in 1 509(a)(2).	n activ come	ities and
10				xclusively to test for pu									
11		An organization organiz supported organization supporting organizati	ted and operated exclus is described in section on and complete line	ively for the benefit of, to 509(a)(1) or section 509(s 11e through 11h.	perform (a)(2). Se	the funct e sectio	ions of, on 509(a)	or carry of (3). Chec	out the po k the bo	urposes o x that de	of one or mo scribes the	re publ type of	licly
		a ☐ Type I b	Type II c	Type III — Function	nally inte	grated	•	1 🗌 1	ype III	Non-fi	unctionally	integra	ated
е		By checking this box, other than foundation r section 509(a)(2).	, I certify that the org managers and other th	anization is not controll an one or more publicly s	led direc supported	tly or in organiz	directly ations de	by one escribed	or more in sectio	disquali on 509(a)	fied persor (1) or	IS	
f		If the organization rece check this box										¥	
g		Since August 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fr	om any	of the fo	llowing	persons	?		
							_					Yes	No
				ontrols, either alone or oported organization?									
			·	bed in (i) above?									
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?		1000		. <i>.</i>		11 g (iii)		
h		Provide the following	information about th	e supported organization	on(s).								
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	column (i	s the ation in) listed in verning nent?	(v) Did yo the organ column (supp	ou notify ization in i) of your port?	organiz colur organiz	s the ration in n (i) ed in the S.?	(vii) Amoun sup	of mon	etary
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)													
<u>(D)</u>					-		<u> </u>						
(E)													
Tota		. <u> </u>									000 000		2012
BAA	Fo	r Paperwork Reduction	on Act Notice, see the	Instructions for Form	990 or 9	ЉU-EZ.			Schedul	e A (Forn	n 990 or 990	J-EZ) 2	2012

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	Section A. Public Support										
begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,865,750.	1,710,185.	1,732,304.	1,818,546.	2,478,478.	9,605,263.				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.				
4	Total. Add lines 1 through 3	1,865,750.	1,710,185.	1,732,304.	1,818,546.	2,478,478.	9,605,263.				
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)						3,477,552.				
6	Public support. Subtract line 5 from line 4						6,127,711.				
Sec	tion B. Total Support										
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
7	Amounts from line 4	1,865,750.	1,710,185.	1,732,304.	1,818,546.	2,478,478.	9,605,263.				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,926.	17,071.	15,005.	12,167.	15,255.	72,424.				
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Fart IV.		1,261.	3,762.	7,521.	10,588.	23,132.				
11	Total support. Add lines 7 through 10						9,700,819.				
12	Gross receipts from related activ	rities, etc (see ins	tructions)				2,413,967.				
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth t	ax year as a section	n 501(c)(3)	▶ □				
Sec	tion C. Computation of Pu	blic Support P	ercentage								
14	Public support percentage for 20	•					63.17%				
15	Public support percentage from						58.95 %				
16 a	16a 33-1/3% support test — 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization										
b	b 33-1/3% support test — 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization										
17 a	17a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization										
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as	box and stop he i a publicly support	e. Explain in Part ed organization	IV how the ▶ □				
	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a							
BAA					Sal	andula A (Farm 00	0 or 990-EZ) 2012				

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sect	tion A. Public Support						
	dar year (or fiscal yr beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')		· - 				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.					· ·	
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	facilities furnished by a governmental unit to the organization without charge						
7 a	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.						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨 👚	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
-	Amounts from line 6					ļ	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					į	
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	-					
	Total support. (Add Ins 9, 10c, 11, and 12.)						<u> </u>
	organization, check this box and			nd, third, fourth, o	or fifth tax year as	a section 501(c)(3)
Sec	tion C. Computation of Pu	blic Support P	ercentage	10 1 20		1	
	Public support percentage for 20						
	Public support percentage from					16	%
	tion D. Computation of Inv				(6)		0.
17		•		-			
18	Investment income percentage to						
	a 33-1/3% support tests — 2012. I is not more than 33-1/3%, check						
	o 33-1/3% support tests — 2011. I line 18 is not more than 33-1/39 Private foundation. If the organ	6, check this box	and stop here. Th	ne organization qu	ualifies as a public	cly supported org	ganization 🟲 🔲
20	rrivate roundation. It the organ	ization did not che	eck a nox on line	14, 13a, 01 13D, 1	CHECK THE DOX SU	u see matruction	s f

2012

Schedule A, Part IV - Supplemental Information

Page 5

Client NCFYL

National Center for Youth Law

94-2506933

6/24/13

12:07PM

Part II.	Line	10 -	Other	Income
----------	------	------	-------	--------

Nature and Source			2012	_	2011	*	2010	_	2009	_	2008
Miscellaneous	'otal	\$ \$	10,588.	\$ \$	7,521. 7,521.		3,762. 3,762.	<u>\$</u> \$	1,261. 1,261.	\$	0.

Schedule B

(Form 990, 990-EZ, or 990-PF)

PUBLIC DISCLOSURE COPY

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service	▶	► Attach to Form 990, Form 990-EZ, or Form 990-PF				
Name of the organization			Employer id	lentification number		
National Center	for Youth Law		94-250	06933		
Organization type (check	one):					
Filers of:		Section:				
Form 990 or 990-EZ		X 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a p	orivate for	undation		
		527 political organization				
Form 990-PF		501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a priva	te founda	ition		
		501(c)(3) taxable private foundation				
,		eneral Rule or a Special Rule anization can check boxes for both the General Rule and a Sp	oecial Rul	e. See instructions.		
General Rule						
For an organization filing contributor. (Complete	g Form 990, 990-EZ, or Parts I and II.)	r 990-PF that received, during the year, \$5,000 or more (in money	or proper	ty) from any one		
Special Rules						
X For a section 501(c)(3) 509(a)(1) and 170(b)(1) (2) 2% of the amount	organization filing Fo (A)(vi) and received on (i) Form 990, Part	orm 990 or 990-EZ that met the 33-1/3% support test of the r from any one contributor, during the year, a contribution of t VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and	egulation he greated II.	s under sections er of (1) \$5,000 or		
For a section 501(c)(7), total contributions of n the prevention of cruel	(8), or (10) organizatio nore than \$1,000 for ι ty to children or anim	on filing Form 990 or 990-EZ that received from any one contributouse <i>exclusively</i> for religious, charitable, scientific, literary, or nals. Complete Parts I, II, and III.	r, during t education	the year, nal purposes, or		
It this box is checked, ei	nter here the total conti	on filing Form 990 or 990-EZ that received from any one contributor than table, etc., purposes, but these contributions did not total to might be that were received during the year for an exclusively religions that were received during the year for an exclusively religions the General Rule applies to this organization because it receives	gious, chai	ritapie, etc.		
religious, charitable, e	tc, contributions of \$5	5,000 or more during the year		► \$		
answer 'No' on Part IV, line 2, o	of its Form 990; or check t	Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 90 the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-Prrm 990, 990-EZ, or 990-PF).	90-PF) but it 'F, to certify	t must y that it does not		
BAA For Paperwork Redi or 990-PF.	uction Act Notice, see	e the Instructions for Form 990, 990EZ, Schedule B (F	orm 990,	990-EZ, or 990-PF) (2012)		

Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 2 of Part 1
_	al Center for Youth Law	' '	506933
	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$250,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$102,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$99,701.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$200,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$250,000.	(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$72,857 <u>.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
		Sahadula B (Farm 0)	90. 990.EZ or 990.PE) (2012

Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	2 of 2 of Part 1
	nal Center for Youth Law	'	506933
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed	l	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$500,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$120,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$330,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$ 156,823.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$100,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
BAA	TEEA0702L 11/30/12	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2012)

Page

1 to

1 of Part II

Name of organization

National Center for Youth Law

94-2506933

Employer identification number

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A		
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$\$	
	Description of noncash property given Description of noncash property given Description of noncash property given (b) Description of noncash property given Description of noncash property given Description of noncash property given	Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (e) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) Description of noncash property given (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions)

Schedule B	(Form 990, 990-EZ, or 990-PF) (2012)		Page Page	1 to 1 or Part III
lame of organi	ization			Employer identification number 94-2506933
<u>Nationa</u>	al Center for Youth Law	A DE CALL DE LA CALLE MANAGEMENT	to costion E01/	
	Exclusively religious, charitable, etcorganizations that total more than Ser organizations completing Part III, enter the contributions of \$1,000 or less for the year. Ouse duplicate copies of Part III if additional services in the services of the year.	7,000 for the year. Complete	columns (a) unrough (i	e) and the following fine chay.
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) escription of how gift is held
7 43 4	N/A			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship	of transferor to transferee
(a) No. from Part l	(b) Purpose of gift	(c) Use of gift	D	(d) rescription of how gift is held
		(e)		
	Transferee's name, addres	Transfer of gift	Relationship	o of transferor to transferee
	(b)	(c)		(d) Description of how gift is held
(a) No. from Part I	Purpose of gift	(c) Use of gift		Description of how gift is held
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Relationshi	p of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	1			

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered 'Yes,' to 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,' to 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,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- 3	ection 501(c)(4), (5), or (6) or	garlizations. Complete Lattini.			
Name	of organization	<u> </u>		Employer identificat	tion number
Nat	ional Center for You	outh Law		94-2506933	3
Par	t I-A Complete if the or	ganization is exempt under section	on 501(c) or is a s e	ection 527 organiz	ation.
		organization's direct and indirect political ca			
Par	t I-B Complete if the or	ganization is exempt under section	л 501(с)(3 <u>)</u> .		
1	Enter the amount of any exci	ise tax incurred by the organization under	section 4955	\$	0.
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955. 🗀		<u>0.</u>
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
Ŀ	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the or	rganization is exempt under section	on 501(c), except	section 501(c)(3).	-
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt function	activities 🟲 \$	
2	Enter the amount of the filing of	organization's funds contributed to other organi	izations for section 527	exempt	
_	function activities	and the second s			
3	Total exempt function expend	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	in. 1.	
	line 17b				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the ar	of all section 527 polit	ical organizations to w	hich the filing
	organization made payments amount of political contribution:	 For each organization listed, enter the ar is received that were promptly and directly delial action committee (PAC). If additional spa 	nount paid from the in ivered to a separate pol	itical organization, such	as a separate
	segregated fund or a politica	il action committee (PAC). If additional spa	ce is needed, provide	information in Part IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing	(e) Amount of political
	(a) Naille	(3) 7001033		organization's funds. If none, enter-0	contributions received and promptly and directly delivered to a separate
		·		,	political organization. If
					none, enter -0
(1)					
<u> </u>					
(2)					
			<u> </u>		<u></u>
(3)			[
(4)					
_					
(5)					
<i>(6</i>)					
(6)			ı		l .

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

Schedule C (Form 990 or 990-EZ) 2012

Part II-A Complete if th section 501(h)		on is exempt under sec	ction 501(c)(3) and fi	led Form 5768 (ele	ction under
	*	ngs to an affiliated group (and	list in Part IV each affiliate	d group member's name,	
	-	nd share of excess lobbying			
		ecked box A and 'limited cor			
(The term 'e	Limits on Lobb xpenditures' me	oying Expenditures eans amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	s to influence p	ublic opinion (grass roots lo	bbying)	496.	
b Total lobbying expenditure	s to influence a	legislative body (direct lobb	ying)	272.	·
c Total lobbying expenditure	-		_	768.	0.
d Other exempt purpose exp				2,239,347.	
e Total exempt purpose exp	enditures (add l	lines 1c and 1d)		2,240,115.	0.
		mount from the following tab		262,006.	
If the amount on line 1e, colum	n (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,000	-	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$1,5		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$17,	,000,000	\$225,000 plus 5% of the excess of	ver \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
•	,	6 of line 1f)	_	65,502.	
-		ss, enter -0	<u> </u>	0.	0.
		ss, enter -0	_	0.]	0.
j If there is an amount other t		er line 1h or line 1i, did the org			Yes No
Section 4511 tax for this y	Cui III II I				
(Some	organizations th colun	4-Year Averaging Period Unat made a section 501(h) el nns below. See the instruction	ection do not have to co	mplete all of the five 2f.)	
	Lot	bying Expenditures During	4-Year Averaging Period	1	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount			258,286.	262,006.	520,292.
b Lobbying ceiling amount (150% of line 2a, column (e))					780,438.
c Total lobbying expenditures	u Ş.		4,653.	768.	5,421.
d Grassroots nontaxable amount			64,572.	65,502.	130,074.
e Grassroots ceiling amount (150% of line 2d, column (e))					195,111.
f Grassroots lobbying expenditures			1,496.	496. Schedule C (Form 9	1,992.
BAA				Schedule C (Form 9	30 OF 330-EZ) 2012

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		a)	(b)
		No	Amount
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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or se	ection 501(c)
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	Part II	l-A, li	ne 3, is
1 Dues, assessments and similar amounts from members	000000	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).			
a Current year.		2a	
b Carryover from last year		2 b	
c Total		2 c	
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	
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	art II A	(affilia	ited group list);
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			
Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
 Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection
Employer identification number

94-2506933 National Center for Youth Law Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate contributions to (during year) Aggregate grants from (during year)...... Aggregate value at end of year..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... 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 No Yes impermissible private benefit?..... Conservation Easements. Complete if the organization answered 'Yes' to 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 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements..... **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a)..... 2 c d 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 ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?..... No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, 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) No 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. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of

art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide,

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:

(ii) Assets included in Form 990, Part X.....

a Revenues included in Form 990, Part VIII, line 1......b Assets included in Form 990, Part X.......

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

in Part XIII, the text of the footnote to its financial statements that describes these items.

▶\$

Part III Organizations maintaining cone	Cuons of Art, Histor	ilogi ilogasulos, ol	Adioi Allillini 1432.	000 (00///////	
3 Using the organization's acquisition, accession, a items (check all that apply):	nd other records, check an	y of the following that are	a significant use of its of	collection	
a Public exhibition	d Loan o	r exchange programs			
b Scholarly research	e Other				
c Preservation for future generations					
 Provide a description of the organization's collect Part XIII. 	ions and explain how they	further the organization's	exempt purpose in		
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	intained as part of the or	ganization's collection?.		Yes	No
Part IV Escrow and Custodial Arrangements. reported an amount on Form 99	Complete if the organiza D. Part X. line 21.	tion answered 'Yes' to	Form 990, Part IV, line	∋ 9, or	
1 a Is the organization an agent, trustee, custodia	an, or other intermediary	for contributions or othe	er assets not included		
on Form 990, Part X?				Yes	No
b If 'Yes,' explain the arrangement in Part XIII	and complete the following	ig table:		Amount	
				Amount	
c Beginning balance					
d Additions during the year					
e Distributions during the year.					
f Ending balance				74	- No.
2 a Did the organization include an amount on Fo				Yes	No
b If 'Yes,' explain the arrangement in Part XIII.	Check here if the explan	tion has been provided	in Part XIII		
Bay Edward Complete if	The average ation on	awarad Waal ta Ear	m 000 Port IV lin	2 10	
Part V Endowment Funds. Complete if			(d) Three years	(e) Four yea	are
	nt (b) Prior year	(C) Two years	(u) Tillee years	(e) i oui yez	
1 a Beginning of year balance	·		-	 	
b Contributions		-	 	 	
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curre	ent year end balance (line	e 1g, column (a)) held a	is:		
a Board designated or quasi-endowment	%				
b Permanent endowment ►	š				
c Temporarily restricted endowment ►	%				
The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.				
3a Are there endowment funds not in the possession	n of the organization that a	re held and administered	for the		
organization by:	-			Yes	No
(i) unrelated organizations				. 3a(i)	1
(ii) related organizations					
b If 'Yes' to 3a(ii), are the related organizations	s listed as required on So	hedule R?		. 3b	
4 Describe in Part XIII the intended uses of the	organization's endowme	nt funds.			
Part VI Land, Buildings, and Equipmer	t. See Form 990, Pa	art X, line 10.			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue
1 a Land					
b Buildings					
c Leasehold improvements.		10,820.	7,662.	3	3,158.
d Equipment		51,627.	39,627.		2,000.
e Other		57,873.			,873.
Total. Add lines 1a through 1e. (Column (d) must e					3,031.
BAA	, , , , , , , , , , , , , , , , , , , ,			ule D (Form 99	

Schedule D (Form 990) 2012 National Center fo	or Youth Law	94-250	6933 Page 3
Part VII Investments - Other Securities. See		line 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: end-of-year market v	Cost or
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(B)			
(C)			
(D)			
(E)			
(F)			
(A) (B) (C) (D) (E) (F) (G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments - Program Related. See			_
(a) Description of investment type	(b) Book value	(c) Method of valuation:	Cost or
/1 \	<u> </u>	end-of-year market v	raiue
(1)			
(2)			
(4)			
(5)	-		
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX Other Assets. See Form 990, Part X,			
	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
_(7)			
(8)	,		
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column			-
Part X Other Liabilities. See Form 990, Part	X, line 25. (b) Book value		
(a) Description of liability (1) Federal income taxes	(b) Book value		
(2)			
(4)	- 		
(5)	<u> </u>		
(6)			
(7)			
(8)			
(9)			
(10)			

(11)

Schedule D (Form 990) 2012 National Center for Youth Law	94-2506933	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue		
1 Total revenue, gains, and other support per audited financial statements	1 5	,424,364.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	55,267.	
	17,632.	
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e 1	,572,899.
3 Subtract line 2e from line 1		,851,465.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		,851,465.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1 Total expenses and losses per audited financial statements		,757,747.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	17,632.	
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d	2e 1	,517,632.
3 Subtract line 2e from line 1.		,240,115.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 2	,240,115.
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	J 4; Part IV, lines 1b and provide any additional inf	2b; Part V, ormation.
Part X - FIN 48 Footnote		
The Organization has evaluated its current tax positions and 1	has concluded th	at as
of December 30, 2012, the Organization does not have any sign	ificant uncertai	n tax
positions for which a reserve would be necessary.		
		_
BAA	Schedule D (F	orm 990) 2012

SCHEDULE J (Form 990)

Compensation Information

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

2012

2012

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer Identification number

94-2506933 National Center for Youth Law **Questions Regarding Compensation** Part I No Yes 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain. 1 b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a?..... Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract Compensation committee Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: 4 a a Receive a severance payment or change-of-control payment?..... **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?.... 4b X 4 c If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?..... 5 a 5b X **b** Any related organization?..... If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6b Х b Any related organization?.... If 'Yes' to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III...... 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? 8 If 'Yes,' describe in Part III...... X If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?.....

National Center for Youth Law Schedule J (Form 990) 2012

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

Page 2

94-2506933

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

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

		(B) Breakdown of	reakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(f) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	deferred compensation		(a)-(i)(a)ei iii iiinoo	deferred in prior Form 990
John O'Toole	Θ	168,879.	0.	0.	23,755.	14,098		
1 Executive Dir.	€	 	0	0.	0		0	
William Grimm	ε	122, 671.	<u> </u>	0	4,90	23,080_	150,658.	0
2 Senior Attorney	(ii)	0	0.	0.		.0	0	0.
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4	€							
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BAA			TEEA4102L 12/11/12	2			Schedule J	Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

OMB No. 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

National Center for Youth Law

Employer identification number

94-2506933

Part I Types of Property (a) Check if (c) Noncash contribution (d) Method of determining Number of applicable contributions or amounts reported noncash contribution amounts items contributed on Form 990, Part VIII, line 1g Art — Works of art..... 2 3 4 Clothing and household goods..... 5 6 Cars and other vehicles.... Boats and planes..... 7 Intellectual property..... 8 9 Securities - Publicly traded..... Securities - Closely held stock..... 10 Securities - Partnership, LLC, or trust interests. Securities - Miscellaneous..... Qualified conservation contribution -Qualified conservation contribution - Other 16 17 Real estate - Other 20 Drugs and medical supplies..... 21 Taxidermy..... Scientific specimens, 24 27,391 **FMV** X 5 25 Other > (Out of pocket 26 Other > 27 Other > Other ▶ 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30 a purposes for the entire holding period?..... X b If 'Yes.' describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?..... 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32 a X noncash contributions?..... b If 'Yes,' describe in Part II.

describe in Part II. BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) 2012

Schedule	M (Form 99	90) 2012	Nationa:	<u>l Center</u>	for	Youth	ı Law				94-2506	933	Page 2
Part II	Supple and 33, number	mental In and whe of items	formation ther the or received,	. Complete rganization or a comb	this is re inatio	part to porting on of bo	provide in Part th. Also	the inforr I, column complete	nation (b), the this p	require ne numb art for a	d by Part I, per of contr any addition	lines 30 ibutions, nal inforr	b, 32b, the nation.
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SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 2012

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identification number
National Center for Youth Law	94-2506933
Form 990, Part III, Line 1 - Organization Mission	
The National Center for Youth Law (NCYL) uses the law to improve	ve the lives of poor
children. NCYL works to ensure that low-income children have the	ne resources, support
and opportunities they need for a healthy and productive future	e. Much of NCYL's work
is focused on poor children who are additionally challenged by	abuse or neglect,
disability, or other disadvantages	
Form 990, Part III, Line 4a - Program Service Accomplishments	
NYCYL is in the process of implementing sweeping mental health	reform as a result of
the Katie A. v. Bonta suit. NCYL and it collaborators settled	Katie A. in September
2011 after years of litigation, reaching a landmark agreement	with the State of
California to improve the system for providing mental health se	ervices for foster
children as well as children at risk of entering foster care.	Under the
groundbreaking agreement, the State of California will make in	tensive home-based
services and intensive care coordination available to eligible	children under
Medi-Cal, California's Medicaid program. Throughout 2012, NCY	L worked with state and
local agencies on an Implementation Plan to roll out new menta-	l health services that
will benefit as many as 30,000 children with unmet mental heal	th needs across the
state.	
NCYL's Foster Youth Education Initiative (FosterEd) improves t	he educational outcomes
of foster children by ensuring each has an educational champion	n supporting his or her
success in school. FosterEd achieved an enormous victory in M	ay 2012 when Indiana
Governor Mitch Daniels and the State Budgeting Office approved	the creation of a new
statewide foster youth education program, including funding fo	r 18 new education
liaison positions, modeled after FosterEd's pilot project in M	arion County. Based on
the Indiana model, FosterEd has implemented pilots in Californ	ia and Arizona that

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization	Employer identification number
National Center for Youth Law	94-2506933
Form 990, Part III, Line 4a - Program Service Accomplishments	
will serve as models for those states	
NCYL made significant progress in reforming the Clark County	(Las Vegas), Nevada
foster care system. The Henry A. v. Wilden suit charges state	and county officials
with failing to protect children in foster care and also alleg	ges they fail to provide
children with medically necessary health and mental health car	ce. In May 2012, NCYL
won a major victory for foster children when a unanimous panel	
of Appeals for the Ninth Circuit overturned the lower court's	
The case in ongoing and calls for sweeping, system-wide reform	
4,000 children in Clark County in foster care today, and those	e who will enter care in
the future.	
NCYL conducted numerous trainings and provided resources and	information to child
advocates throughout California to improve the way information	n is shared among the
many organizations serving foster children, including child w	elfare agencies and the
juvenile courts.	
NOW and the collaborations had a major wigtory in September 2	
NCYL and its collaborators had a major victory in September 2 signed Senate Bill 9 (SB-9). NCYL co-sponsored this legislat	
youth who have been sentenced to life in prison and meet rigo	
opportunity for resentencing, while still holding them account	
The 990 is reviewed by the Director of Finance and Administra	
Director and members of the board prior to filing.	
DITECTOR and members of the pourt briot to titing.	

Name of the organization	Employer identification number
National Center for Youth Law	94-2506933
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of	Conflicts
Staff and board members are required to review the conflict	of interest policy. Any
potential conflicts of interest are reviewed, resolved and d	ocumented in the board
minutes.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO,	Top Management
The salary of the Director of the National Center for Youth	Law is set by the Board
of Directors. The Board determines the Director's salary on	an annual bases and
considers, among other factors, the salaries of executive di	rectors at comparable
non-profit organizations. The salary of the Director normall	y becomes effective on
January 1st of each year.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Office	rs & Key Employees
Compensation is determined pursuant to a written policy.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	e
Other public websites and upon request.	

California Exempt Organization
Annual Information Return

FORM

2012	2 Annual Information Return			-	199
	ear 2012 or fiscal year beginning month day year , and ending month		ay	year	
Corporation/Org		- 1		orporation n	umber
	L CENTER FOR YOUTH LAW room, or PMB no.)		C0909: FEIN	875	
•		- 1	94-25	06933	
405_14T City	H STREET, 15TH FLOOR State ZIP Code		J-1-6J	00933	
OAKLAND	CA 94612				
A First Retur	n Yes X No J If exempt under R&TC Section 23701d, ha	s the			·
	🗀 🗀 I ordanization during the year: (1) darticipa	ited in any Juence			
	Return	ade an ele	ction		_
D Final Retur	Discolard Discolard (Mithdrawn) public charities)?			X Yes	No
D Final Retu	If 'Yes,' complete and attach form FTB 35 ■ Merged/Reorganized Enter date: ■	09.			
	K Is the organization exempt under R&TC So	ection 2370	1g? •	Yes	X No
E Check acco	ounting method: If 'Yes,' enter gross receipts from nonmember sources				
	Cach 2 V Accruial 2 Other				
F Federal re	turn filed?	r charitabl	е,		
	990T 2 • 990 (PF) 3 • Sch H (990) and is supported primarily (50% or more) by public		x	
	roup filing for the subordinates/affiliates? ● []			_	
	tach a roster. See instructions M Is the organization a Limited Liability Containing a group exemption? Yes X No N Did the organization file Form 100 or Form			Yes	X No
	'hat's the parent's name? taxable income?			Yes	X No
I Did the or	O Is the organization under audit by the IRS audited in a prior year?	or has the	IRS	Yes	X No
governing	instrument, articles of incorporation, or bylaws		•		
	not been reported to the Franchise Tax Board? • Yes X No kplain, and attach copies of revised documents.			CACA1112L	10/11/10
-	Complete Part I unless not required to file this form. See General Instructions B and C.			CACATTIZE	10/11/12
	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	• 1		1,094	,987.
	2 Gross dues and assessments from members and affiliates				
Receipts and	3 Gross contributions, gifts, grants, and similar amounts received	• 3	<u> </u>	2,760	,300.
Revenues	4 Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Instruction B	4	T	3,855	287
	5 Cost of goods sold	-		3,633	,201.
	6 Cost or other basis, and sales expenses of assets sold 6 3,82	2.			
	7 Total costs. Add line 5 and line 6	7		. 3	,822.
	8 Total gross income. Subtract line 7 from line 4		1		,465.
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18		 		,115.
-	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8		+	1,611	,350.
	11 Filing fee \$10 or \$25. See General Instruction F		+		
Filing Fee	13 Penalties and Interest. See General Instruction J	∵	1		
	14 Use tax. See General Instruction K	• 14			
	15 Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result	15			
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	e best of m	y knowledg	e and belief,	it is true,
Sign Here	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled Title Date	yv. 	Teleph		
nere	Signature of officer			35-809	8
	Preparer's Adele Kaneda 6/24/13 Check if self-signature	- [7]	● PTIN P0166	1022	
Paid Preparer's	CROSRY & KANEDA CPAS		● FEIN	4744	
Use Only	Firm's name (or yours, if self-employed) 1611 TELEGRAPH AVE STE 318		N/A		
	and address OAKLAND, CA 94612-2151		Telep	hone	
			(510)		_
	May the FTB discuss this return with the preparer shown above? See instructions		• X	Yes	No

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

			Gross sales or receipts from all busing				1	
		2						
			Interest				2	
		3	Dividends			•	3	
Receip	ots	4	Gross rents			•	4	
from [*] Other		5	Gross royalties			•	5	<u></u>
Source	es	6	Gross amount received from sale of a	ssets (See instruction	ons)		6	3,295.
		7	Other income. Attach schedule				7	1,091,692.
			Total gross sales or receipts from other sources				8	1,094,987.
Expen	ses		Contributions, gifts, grants, and similar amounts				9	
and		10	Disbursements to or for members				10	
Disbui ments			Compensation of officers, directors, a				11	308,397.
		12	Other salaries and wages				12	1,060,609.
		13	Interest				13	
		14	Taxes				14	103,864.
		15	Rents				15	119,905.
		16	Depreciation and depletion (See instr				16	7,683.
			Other Expenses and Disbursements.				17	639,657.
		17	Total expenses and disbursements. Add line 9 t				18	2,240,115.
		_					<u> </u>	
Sche		<u> </u>	Balance Sheets	Beginning of t			or taxa	ble year (d)
Asset:	_			(a)	(b)	(c)		
					326,246.			952,433. 1,230,324.
	,		receivable		522,366.			1,230,324.
			eivable					
			hate was commont obligations				•	
			tate government obligations					
			n other bonds		543,717.			872,547.
			n stockSTMT3		343,717.			012,541
	_		IS		-			
_			ents Attach schedule	114 200		120,32	20	
			ssets	114,328.	74 707	· · · · · · · · · · · · · · · · · · ·		72 021
-			ated depreciation	39,601.	74,727.	47,28) 9 .	73,031.
					20.050			20 422
			Attach schedule STM 4		32,259.			39,433.
					1,499,315.			3,167,768.
Liabil	ities a	and n	et worth					144 074
			able		109,238.		•	111,074.
15	Contrib	outions,	, gifts, or grants payable				•	
16	Bonds	and no	tes payable				•	
17	Mortga	iges pa	yable				•	
18	Other I	liabilitie	es. Attach schedule			<u></u>		
			or principle fund				•	
20	Paid-ir	n or ca	pital surplus. Attach reconciliation		-		•	
			nings or income fund		1,390,077.		-	3,056,694.
22	Total I	iabilitie	es and net worth		1,499,315.			3,167,768.
Sche			Do not complete this schedule if	the amount on Sche	dule L, line 13, column		$\overline{}$	
			er books	1,666,617.		oooks this year not incl		
_			ne tax			h sch SEE . S'	r 5	55,267.
			oital losses over capital gains		8 Deductions in this re	_	-	
4			ecorded on books this year.		against book income			
_			ule			1 line 8		55,267.
5			orded on books this year not deducted		10 Net income per			33,207.
		refurn	. Attach schedule • • • • • • • • • • • • • • • •					
			ne 1 through line 5	1,666,617.	Subtract line 9 f	rom line 6		1,611,350.

059

TAXABLE YEAR
2012

Political or Legislative Activities by Section 23701d Organizations

__CALIFORNIA FORM

3509

	ayyear
Attach to Form 199. FTB 199N filers see instructions. Corporation/Organization name	California corporation number
National Center for Youth Law	0 9 0 9 8 7 5
Address (suite, room, or PMB no.)	FEIN
405 14th Street, 15th Floor	9 4 2 5 0 6 9 3 3
City State Zip Code CA 9 4 6	6 1 2
Part I - Political Activities	<u> </u>
Complete if the organization supported or opposed a candidate for public office. See instructions.	
1 Has the organization participated or intervened in any political campaign on behalf of any elective public office If "Yes," describe the activities. Provide a summary of any published material relating to the activities.	candidate? ↑ Yes No
Has the organization contributed funds to support or oppose any individual public office candidate, or any orgato support or oppose a public office candidate? If "Yes," describe the activities. Include the name of the individual or organization the organization contributed the amount paid, and date of contribution.	2 Yes No
Part II – Legislative Activities. See instructions. Complete if the organization attempted to influence legislation. 3 Has the organization attempted to influence any national, state or local legislation, or ballot measure?	
If "Yes," describe the activities in detail. Provide a summary of any published materials relating to the activities See Attached.	
Has the organization, during the taxable year listed above, filed a federal election Form 5768, Election/Revocati of Election by an Eligible Section 501(c)(3) Organization to Make Expenditure to Influence Legislation? The organization cannot make this election if it is a church, an integrated auxiliary of a church, a private foundat an affiliated organization. If "Yes," attach a copy of federal Form 5768 filed with the Internal Revenue Service (IRS).	4 □Yes ☑No
If the organization elected to make expenditures to influence legislation, furnish the following financial information 5	5 <u>\$ 2,240,115 00</u> er or employee
7 Grass Roots Expenditures The amount expended to influence any legislation through attempts to affect the opinions of the general public segment of it	

National Center for Youth Law

94-2506933

Year Ended December 31, 2012

Franchise Tax Board
Form 3509
Political or Legislative Activities

Lobbying Description:

NCYL works with the California Foster Youth Education Task Force to raise awareness about the educational needs of students in foster care. In 2012 we communicated and helped other communicate with legislators, testified, and helped organize testimony at the budget hearings, and worked with media to oppose the elimination of the Foster Youth Services program in the Governor's proposed budget. NCYL also wrote letters of support for several bills that were aimed to combat the school to prison pipeline. The bills focused on improving responses in the schools to avoid referrals to the juvenile justice system.

2012	California Statements	Page 1
Client NCFYL	National Center for Youth Law	94-2506933
6/24/13		12:07PM
Statement 1 Form 199, Part II, Line 7 Other Income		
Other Investment Incom	ie	15,255.
Statement 2 Form 199, Part II, Line 17 Other Expenses		
Advertising and Promot Conferences, Convention Dues, licenses, service Information Technology Insurance	ion ins, and Meetings ee fees ions	16,111 29,614 8,790 17,208 8,608 16,381 2,502 66,263 137,966 200,761 27,391 39,928.
Statement 3 Form 199, Schedule L, Line Investments in Stocks		
Publicly Traded Securi	.tiesTota	al \$ 872,547.
Statement 4 Form 199, Schedule L, Line Other Assets	12	
DepositsPrepaid Expenses and I	Deferred Charges. Total	8,327. 31,106. al \$ 39,433.

2012	California Statements	Page 2
Client NCFYL	National Center for Youth Law	94-2506933
6/24/13		12:07PM
Statement 5 Form 199, Schedule M-1, Line 7 Income Recorded on Books Not or		
Unrealized gain		55,2 <u>67.</u> 55,267.
	Total <u>\$</u>	55,201.
		1.5

2012

California Statements

Page 2

Client NCFYL

National Center for Youth Law

94-2506933

6/24/13

12:07PM

	1			(C)	_						
(A) Name and Title	(B) Average hours per week (list	one bo	ox, ur	not o	checi	k more on is bot or/truste	th an		come	(D) Reportable pensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		the (W-2	organization 2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
			8			<u> </u>						
(1) Peter B. Edelman	2											**************************************
President	0	X		Х			igspace	1		0.	0.	0.
(2) Terrence Lee Hancock	2										_	
Vice President	0	X	<u> </u>	Х			┡			0.	0.	0.
	2			,							0	_
(4) James D. Weill	0	Х	 	Х			╀			0.	0.	0.
Treasurer	- 2 ~	Х		x						0.	0.	
(5) Victoria L. Boesch	2		\vdash	H		\vdash	-	-		<u> </u>	0.	0.
Board Member		Х						ľ		0.	0.	0.
(6) Alexander L. Brainerd	2					-	\vdash			0.		<u> </u>
Board Member		Х								0.	0.	0.
(7) David Brown	2			П			T					
Board Member	0	Х					١.			0.	0.	0.
(8) Annette Carnegie	2		П	П								
Board Member	0	X								0.	0.	0.
(9) Judith Gold	2											
Board Member	0	X	L				_			0.	0.	0.
(10) James W. Head	2										1	
Board Member	0	Х	_				┡			0.	0.	0.
(11) Dr. Charles E. Irwin	2									_	_	
Board Member	0	Х	-				⊢	\vdash		0.	0.	0.
(12) Walter P. Loughlin Board Member	- 2	ų,								ا م	0	
(13) John D. MacIntosh	2	Х	\vdash	Н			┢	┢		0.	0.	0.
Board Member		X								0.	0.	
(14) Mary E. McCutcheon	2	Α.	\vdash		_		1				0.	0.
Board Member	1-5-	x								0.	0.	0
(15) Hector Javier Preciado		T	2	Т	Т		<u> </u>	_			<u> </u>	
Board Member			2	Ϊx							o. o	. 0.
(16) Lori A. Schechter			2 0	\top	T							
Board Member			0] x							0. 0	0.
(17) John O'Toole			38		Γ							
Executive Dir.			0		\perp	X				168,87	9. 0	. 37,853.
(18) Hayden Lilien			38		Τ				П			
Dir. of Finance			0	1_	\perp	Х				93,02	7. 0	9,041.
(19) Michael Harris		-4-	<u>38</u> 0									
Senior Attorney					\downarrow		Ш	Х	Ш	118,11	0. 0	. 25,992.
(20) William Grimm		-4-	<u>38</u>									
Senior Attorney (21)		+	0	+	╀	+		Х	Н	122,67	1. 0	. 27,987.
~		-4-		-								
(22)		+		+	+	+-			$\vdash\vdash$	<u> </u>	_	
		-+-		-								
				_	_							

MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 Telephone: (916) 445-2021

WEBSITE ADDRESS: http://ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code Section 12586.1. IRS extensions will be honored.



Chaptife									
State Charity Registration Number 034950 Check if:									
	<u>, </u>	Amended							
NATIONAL CENTER FOR YOUTH LA	₩	Millellided							
405 14TH STREET, 15TH FLOOR		Corporate or	Organization No. C0909875						
Address (Number and Street)			<u> </u>						
OAKLAND, CA 94612	State ZIP Code	Federal Empl	oyer ID No. <u>94-2506933</u>						
ANNUAL REGISTRATION I	RENEWAL FEE SCHEDULE (11 Ca								
Make Che	ck Payable to Attorney General's	Registry of Cha	aritable Trusts						
Gross Annual Revenue Fee	Gross Annual Revenue	Fee	Gross Annual Revenue		Fee				
Less than \$25,000 0 Between \$25,000 and \$100,000 \$25			Between \$1,000,001 and \$10 million Between \$10,000,001 and \$50 million		150 225				
Greater than \$50 million									
PART A — ACTIVITIES									
For your most recent full accounting period (beginning 1/01/12 ending 12/31/12) list:									
Gross annual revenue \$ 3,851,465. Total assets \$ 3,167,768.									
PART B — STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT									
Note: If you answer 'yes' to any of the qu	estions below, you must attach a	separate sheet	providing an explanation and details	s for e	ach				
'yes' response. Please review RRF-	1 instructions for information req	uired.			l Nia				
1 During this reporting period, were there	any contracts, loans, leases or oth	er financial tra	nsactions between the	Yes	No				
organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?									
During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?									
3 During this reporting period, did non-pro	gram expenditures exceed 50% of	gross revenue	s?		x				
4 During this reporting period, were any organ Form 4720 with the Internal Revenue Se	nization funds used to pay any penalf ervice, attach a copy.	ty, fine or judgme	ent? If you filed a		x				
5 During this reporting period, were the se purposes used? If 'yes,' provide an attachm provider.	ervices of a commercial fundraiser nent listing the name, address, and to	or fundraising elephone number	counsel for charitable of the service		х				
6 During this reporting period, did the organiz the name of the agency, mailing address			le an attachment listing SEE STATEMENT 1	X					
7 During this reporting period, did the organiz indicating the number of raffles and the	ation hold a raffle for charitable purp				х				
Does the organization conduct a vehicle do the program is operated by the charity o charitable purposes.		attachment indicates with a comm	ating whether nercial fundraiser for		x				
Did your organization have prepared an principles for this reporting period?	audited financial statement in acco	ordance with ge	enerally accepted accounting	х					
Organization's area code and telephone num	ber 510-835-8098								
Organization's e-mail address HLILIEN®	YOUTHLAW.ORG								
I declare under penalty of perjury that I have and belief, it is true, correct and complete.	examined this report, including a	ccompanying	documents, and to the best of my kn	owled	ge				
Signature of authorized officer Print	led Name	Title	Date						
pergraduate of additionable of filled	wa manig	TILLE	Date						

2012

California Statements

Page 1

Client NCFYL

National Center for Youth Law

94-2506933

6/24/13

12:07PM

Statement 1 Form RRF-1, Part B, Line 6 Government Agency That Provided Funding

Alameda County Health Care Services Agency 1000 San Leandro Blvd., Ste. 300 San Leandro, CA 94577 Contact: Connie Yale 510-667-7990

Equal Access Fund 180 Howard Street San Francisco, CA 94105-1639 Contact: Lorna Choy, Sr. Grants Administrator 415-538-2535

IOLTA 180 Howard Street San Francisco, CA 94105-1639 Contact: Lorna Choy, Sr. Grants Administrator 415-538-2535

Department of Health and Human Services Children's Bureau Portals Building, Ste. 8000 1250 Maryland Ave., SW Washington, DC 20024 Contact: Dori Sneddon 202-205-8024