Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	e 2016 ca	lendar year, or tax year b	eginning		, and e	nding				
В	Check if a	applicable	C Name of organization	YOUTH LAW CENTER				D Employer	dentificat	ion number	
\mathbf{X}	Address o	change	Doing business as								
\equiv			Number and street (or PO	box if mail is not delivered to	street address)	Room/suite		94-1715280			
<u></u>	Name ch	ange	832 Folsom Street			700		E Telephone	number		
	nitial retu	ırn	City or town		State	ZIP code		(415) 543-33	270		
\Box	inal mum	/terminated	San Francisco		CA	94107		(410) 040-00	,,,,		
느'	inai retuiri	viernimateo	Foreign country name	Foreign province/st	ate/county	Foreign postal	code				
\square	Amended	l return	<u></u>					G Gross rece	pts \$	2	,043,027
\Box	Applicatio	n pending	F Name and address of princ	ipal officer			H(a) is the	s a group return fo	r subordina	tes? Ye	s X No
		p	Bill Koskı 832 Folsom S	Street Suite 700 San	Francisco CA	94107		all subordinates		=	s No
							1 ''	vo," attach a list			
	ax-exem	<u>`</u>	X 501(c)(3) 501(c)	() ◀ (insert no) 4947(a)(1	1) or 527	Į "′	to, attach a list	(300 1130	14010113)	
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KF	orm of o	rganization	X Corporation Tru	ust Association	Other >	L Yea	ar of format	tion 1971	M State	e of legal domic	le CA
P	art l	Su	mmary								
	1		lescribe the organization	's mission or most sign	nificant activitie	es Prot	ection of	the rights of	minors	Provide	
8	1		ucation, counsel, legal re					the righte of			
ä			arding the rights of minor		0333314110	C 111 1110 101011					
E					d to			Ab OCO/ -			
8	2		his box ▶ if the org		•	s or aisposea	or more	tnan 25% o	_ [assets	40
න්	3		of voting members of th			341.1463		<u> </u>	3		12
8	4		of independent voting m		• .			F	4		12
Ę	5		mber of individuals empl	-	2016 (Part V,	iine 2a)		ļ	5		17
ਹ	6		mber of volunteers (estir		(0) 40			<u> </u>	6		12
~	7a		related business revenue					<u> </u>	7a		0
2∰/7 Activities & Governance	b	Net unre	elated business taxable i	ncome from Form 990)- I, line 34		 		7b		0
		O b		011 to - 41-1	•		<u> </u>	Prior Year	470	Current Y	
DEGverlue?	8		utions and grants (Part V					1,885			1,119,265
e,	9		n service revenue (Part \				<u> </u>		,490		910,482
L E	10	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							,724		2,000
	11	Other re	venue (Part VIII, column	1 (A), lines 5, 6d, 8c, 9	c, 10c, and 11	exece!	VED	7	0		0 747
Expenses NINEID	12		enue—add lines 8 through			Maria	The same of	2,576			2,031,747
빛	13	Grants a	and similar amounts paid	(Part IX, column (A),	lines 1–3/9	MUA 50	7017	<u> </u>	0		0
\$	14	Benefits	s paid to or for members	(Part IX, column (A), I	ine 4)	40	1	61 <u> </u>	0		104 404
898	15	Salaries,	s paid to or for members , other compensation, emp ional fundraising fees (P	bioyee benefits (Part IX,	column (A), line	SOG BEN	IT	1,594			1,404,424
ens	16a		ional fandraionig loco (i	art ist, column (r ty, mic	, , , , ,			Ⅎ	_ 0		0
×	b		ndraising expenses (Parl			100,381	 	050			775 440
ш	17		xpenses (Part IX, column		-	- 05)			,979	 ,	775,118
	18		penses Add lines 13-17		column (A), IIN	ie 25)		2,254			2,179,542
	19	Revenu	e less expenses Subtra	ct line 18 from line 12			 		,067		<u>-147,795</u>
Net Assets or Fund Balances	20	Total as	cote (Bort V. line 46)				Beginn	ing of Current		End of Y	2,343,703
\888 Balc	20		sets (Part X, line 16)					2,440			
¥ 5	21		bilities (Part X, line 26)	http://www.line.com/line.com/line.com/line.com/line.com/line.com/line.com/line.com/line.com/line.com/line.com/	. 00				,591		185,152
			ets or fund balances Su	btract line 21 from line	20		ــــــــــــــــــــــــــــــــــــــ	2,306	,346]		2 <u>,158,551</u>
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Sig		7	Signature of officer	- 17 ·				Date .	.1 1		
He	re		VJennifer R	odriquez				1	4 14 /	17	
		•	Type or print name and title	71.7					<u></u>		
		Prin	t/Type preparer's name	Preparer's	signature		Date	• 1		PTIN	
Pa	id				一 フィ		}		neck] #	
	eparer	Rot	pert Izabal	<i>k</i>	100	P/A-] 10/		elf-employe	1, 2, 1, 2, 2	486
	e Only	_	n's name ► Izabal, Bern	aciak & Company				Firm's EIN	77-0016	6122	
			n's address ► 388 Market	Street, San Francisco	, CA 94111		}	Phone no	(415) 8	96-5551	_

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

1 Bnefly describe the organization's mission Provide legal education, advise, counsel, legal representation and general assistance in the reform of the law regarding, the rights of minors 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If "Yes, "Gescribe these new services on Schedule O 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 663.993 including grants of \$) (Revenue \$ 910,492) General Mission - Provide Advocay by developing innovative solutions and strategies to better address the legal needs of youth who come in contact with Child Welfare Agencies and Juvenile Justice Systems 4b (Code) (Expenses \$ 855,198 including grants of \$) (Revenue \$) Foster Care Recruitment and Retention Project, QPI - The Quality Parenting Initiative is Youth Law Center's approach to strengthening foster care, including kinship care, using training and marketing principles it is a process designed to help a site develop new strategies and practices, rather than imposing upon, it a predetermined set of "best practices"	Check if Schedule O contains a response or note to any line in this Part III . Birefly describe the organization's mission Provide legal education, advise, counsel, legal representation and general assistance in the reform of the law regarding the rights of minors Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27 Yes "describe these new services on Schedule O Yes No. Yes "describe these new services on Schedule O Undertained or year which were not listed on the prior Form 990 or 990-E27 Yes Yes "describe these new services on Schedule O Undertained or year which were not listed on the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No. Yes Yes No. Yes Y	orm 990 (94-1715280	Page 2
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1,882,016 Other program services (Describe in Schedule O) (Expenses \$

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Total program service expenses

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Part IV	Checklist of Required Schedules	
	CHECKIISI OI NEGGIIEG SCHEGGIES	

			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	4	x	
2	•	1 2	$\frac{\hat{x}}{x}$	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		-^ -	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	×	
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,	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			_^_
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	}	Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X _
0	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	- 1	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	75.C.	222	المستدا
	Schedule D, Part VI	11a	_x	
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	446	ł	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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	110		Х
А	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
2a	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		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		<u> </u>
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		 ^-
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			. .
0	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
8	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	X	
9	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

Form **990** (2016)

Par	t IV Checklist of Required Schedules (continued)			
20-	Did the erganization energies and or more heapital facilities? If "Van " complete Schodule H	200	Yes	No X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?.	20a 20b		^
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
- 1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV 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	28a		X
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>		'	
_	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	00-	!	J
29	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29_		 ^ -
50	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,	30	_	
••	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	"		<u> </u>
	If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1.	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related]]
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	1	1	l .
	VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		 	1
	192 Note All Form 990 filers are required to complete Schedule O	1 35	ı Y	I

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Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			П
	Officer in octional of contains a response of flote to any fine in this fact v	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			1
-	gaming (gambling) winnings to prize winners?	1c	Χ	1
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 17	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		_	
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" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
þ	If "Yes," enter the name of the foreign country			•
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	ļ	₩-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	۱_		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ch		
-	gifts were not tax deductible?	6b		┼
7	Organizations that may receive deductible contributions under section 170(c).			į
а	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?	7b	 	 ^
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		+-
·	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	·	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			1
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_	ĺ	
11	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	1
	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?	12a	ļ	┼
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40	ļ	+-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	├-	+
L	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	1		
	Enter the amount of reserves on hand	1		
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a	†	X
. Ta	Did the diganization receive any payments for indeed tanning services during the tax year.			 ^

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Part VI

YOUTH LAW CENTER 94-1715280

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 or note to any line in this Part VI

Sect	ion A. Governing Body and Management				,
_		_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 12			
	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				
L	committee, explain in Schedule O	41			
þ	Enter the number of voting members included in line 1a, above, who are independent	1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with		_	<u> </u>
_	any other officer, director, trustee, or key employee?		2_		X
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, or trustees, or key employees to a management company or othe		3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's a	issets?	5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint	_		,
h	one or more members of the governing body?	•	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	,	 .		,
8	stockholders, or persons other than the governing body? Did the organization contemporaneously degree the meetings held or written actions undertaken	a duran	7b		X
0	Did the organization contemporaneously document the meetings held or written actions undertaken the year by the following	n auring			
а	The governing body?			~	
b	Each committee with authority to act on behalf of the governing body?	•	8a 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	aachad	00	^	
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	sacried	9		×
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue (}	
	The second of th	miomai riovonao e	,000.	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	L
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g		12b	Χ	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If '	'Yes,"			
	describe in Schedule O how this was done		12c	Χ	
13	Did the organization have a written whistleblower policy?		13	Х	<u> </u>
14	Did the organization have a written document retention and destruction policy?		14	Х	<u> </u>
15	Did the process for determining compensation of the following persons include a review and appro				
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			اـــا
a	The organization's CEO, Executive Director, or top management official		15a	Χ	<u> </u>
b	Other officers or key employees of the organization		15b		X_
16-	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 arrang	ement			
b	with a taxable entity during the year? If "Yes " did the organization follows a written policy or procedure requiring the experization to evaluate the experization of the experization o	ata ita	16a		X
IJ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	the organization's exempt status with respect to such arrangements?	yuaru	16b		·
Sect	ion C. Disclosure		ניטט	L	<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed CA				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501(c)(3)	s only	/)	
	available for public inspection. Indicate how you made these available. Check all that apply	,		,	
		plain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents,		cy, an	d	
	financial statements available to the public during the tax year		-		
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks and records	•		
	Mehrzad Khajenoori	(415) 543-3379			
	832 Folsom Street, Suite 700, San Francisco, CA 94107				

• • • • • • • • • • • • • • • • • • •	YOUTH LAW CENTER 94-1715280	Page 7						
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated							
	Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII							
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees							
1a Complete to organization's	•							

- 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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	s pe	ition more rson irecto	n oth start Highest compensated the start Highest compensated	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) William F Abrams	0 50									
Director	0 00	X						0	0	0
(2) Honorable Susan Bloom	0 50		Ī -							
Director	0 00	X						0	0	0
(3) Fatima Goss Graves	0 50									
Director	0 00	-	L					0	0	0
(4) Shani King	0 50								ļ	
Director	0 00							0	0	0
(5) Karen Marangı	0 50			l						
Director	0 00		<u> </u>	<u> </u>	<u> </u>	<u> </u>		0	0	0
(6) Honorable Tomar Mason	0 50	•							1	_
Director	0 00	+	╙	 			1	0	0	0
(7) Virginia Valentine	0 50		l			1			_	
Director	0 00		ـــ	ļ			<u> </u>	0	0	0
(8) Gerald Singleton	0 50						Į	_		
Director	0 00		\vdash	├-	-	₩	-	0	0	0
(9) Barbara C Thompson	1 00		İ	١,,						
Secretary	0.00	_	 	X	 	 	╁	0	0	0
(10) Howard F Fine	1 00									0
Senior Vice Chair	0 00	+	╁	X	├—	 	├	0	0	
(11) Ray Tucker	1 00	· I		x		1		0	0	0
Vice Chair	1 00	_	┼	 ^	╁	├ ─	 		-	
(12) Bill Koski Chair	0 00			x				l 0		
(13) Jennifer Rodriguez	40 00	_	+	 ^	╁	 	┼	 	-	
Executive Director	0 00			x				120,844	0	32,774
(44) Morro Domus	40 00	-	1-	╁	\vdash	\vdash	 -	120,044	†	02,774
Managing Director	0 00					x		131,372	0	8,505
managing Dirocol	1 000		ч—	<u> —</u>				10.,072	<u> </u>	5 990 (0040)

	Section A. Officers, Directors, Tru (A) Name and title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estima amoun	ted t of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	othe compens from t organiza and rela organiza	sation he ation ated
	Carole Shauffer or Director	40.00 0 00	1					X	150,788			15,031
(16)												
(17)					-						 	
(18)					-						1	
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1b c	Sub-total Total from continuation sheets to Part VII, So	ection A		<u>.</u>	•	J		>	403,004		0	56,310
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (including but not line reportable compensation from the organization		sted a	abov	/e) v	vho	recei	ved	403,004 more than \$100		0	56,310
3	Did the organization list any former officer, dire employee on line 1a? If "Yes," complete Sched	ector, or trustee,	•		loye	e, c	or higi	nest	t compensated		Ye 3 X	s No
4	For any individual listed on line 1a, is the sum of the organization and related organizations greated individual	•	-						•		4 X	
5	Did any person listed on line 1a receive or accretor services rendered to the organization? If "Yo	•			•			_		vidual .	5	A XX
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest compe compensation from the organization. Report co year										s tax	
	(A) Name and business add	ress						_	(B) Description of ser	vices	(C) Compensation	
												0
			-					-			-	0 0
_												0
										Japanes		0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the		ted to ►	the	se	ıste	d abo 0		who received			

Statement of Revenue

		Check if Schedule O contains	a response or	note to any line in	this Part VIII		•	🔲
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated campaigns	. 1a	0				
	b	Membership dues	1b					
يَّ قَا	C	Fundraising events	1c	6,135				Ì
8 X	d	Related organizations	1d					ł
S'E	е	Government grants (contribution				+		
ig is	f	All other contributions, gifts, gran						1
		similar amounts not included abo		1,113,130				l .
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in I		0				į į
ပ ≅	h	Total. Add lines 1a-1f		>	1,119,265	ſ		l
				Business Code				
e)	2a	Consultant Fees		541100	748,555	748,555		<u> </u>
Se l	b	b			0			
ş	С				0			
9	d				0			
E	е				0			
Program Service Revenue	f	All other program service revenu	е		161,927	161,927		<u> </u>
٦	g	Total. Add lines 2a-2f		<u> </u>	910,482			
)	3	Investment income (including div	ridends, interest	and				
- {		other similar amounts)		•	2,000			2,000
- {	4	Income from investment of tax-e	xempt bond pro	ceeds >	0		 	
- {	5	Royalties	() Don't	(v) Company	0			 ;
- 1			(i) Real	(ii) Personal				1
ſ	6a	Gross rents			1			1
ſ	b	Less rental expenses .						
Ì	C	Rental income or (loss)	L	0			** _**_	
)	d Zo	Net rental income or (loss) Gross amount from sales of	(i) Securities	(II) Other	0			}
	7a	assets other than inventory	(i) decartaes			ļ		j
ł	b	Less cost or other basis	 	' 		<u> </u>		1
	•	and sales expenses	1	o o		•		
	С	Gain or (loss)						· ·
	d	Net gain or (loss)		<u> </u>	0			
	_	riot gam or (1000)						
Other Revenue	8a	Gross income from fundraising events (not including \$	6,135			1		
æ		of contributions reported on line	1c)		ĺ			
ē	_	See Part IV, line 18	a	11,280			· I	
동		Less direct expenses	b	11,280				
	C	Net income or (loss) from fundra	•		0			
	ya	Gross income from gaming activ						
	.	See Part IV, line 19 Less direct expenses	a	0	1	1		
İ		Net income or (loss) from gamin	b a actuutus		0			
		Gross sales of inventory, less	y activities	<u></u>				
	170	returns and allowances	а	0				
	b	Less cost of goods sold	b	0				
j		Net income or (loss) from sales	- 	•	0			\
		Miscellaneous Revenue		Business Code		-		1
	11a				0			
	b				0			
	С				0			
	d	All other revenue			0			
	е	Total. Add lines 11a-11d		>	0			
1	12	Total revenue See instructions			2 031 747	010 482		ນໄ ລຸດດດ

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all			omplete column (A)	
	Check if Schedule O contains a response or note	to any line in this Pa	nrt IX	·	
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	domestic governments See Part IV, line 21 .	0			
2	Grants and other assistance to domestic			1	
	individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	_			;
	individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,	450.040	400 575	40 404	0.040
_	trustees, and key employees .	153,618	130,575	16,131	6,912
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	اه			
7	persons described in section 4958(c)(3)(B)	1,026,955	855,218	120,216	51,521
7 8	Other salaries and wages Pension plan accruals and contributions (include	1,020,955	655,216	120,216	51,521
0	section 401(k) and 403(b) employer contributions)	24,301	20.656	2,551	1,094
9	Other employee benefits	199,550	169,824	20,808	8,918
10	Payroll taxes	199,550	109,024	20,000	0,910
11	Fees for services (non-employees)				
''a	Management	o			
b	Legal	l ol			
c	Accounting	8,900		8,900	
ď	Lobbying .	0,000		0,500	
e	Professional fundraising services. See Part IV, line 17	ol ol			_
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	 	··		
13	Office expenses	25,216	9,391	8,427	7,398
14	Information technology	24,443	17,775	800	5,868
15	Royalties	2.1,1,0			
16	Occupancy	161,871	147,695	7,088	7,088
17	Travel	258,682	247,600		11,082
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates .	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	13,716	8,634	5,082	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column		Ì	ł	
	(A) amount, list line 24e expenses on Schedule O)				
а	Equipment rental/mainenance	14,991	13,541	1,450	
þ	Membership Dues	7,957	5,637	1,820	500
C	Library	11,745	11,745		
ď	Consultants	246,803	242,931	3,872	
е	All other expenses	794	794		
25	Total functional expenses. Add lines 1 through 24e	2,179,542	1,882,016	197,145	100,381
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs	j j		j	
	from a combined educational campaign and				
	fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)				
	10110WINING SUF 30-2 (ASC 330-720)	ıi	i		

Part X Balance Sheet

		Check if Schedule O contains a response or	note to	any line in this Part X	•		
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			134,222	2	572,298
	3	Pledges and grants receivable, net			492,265	3	119,500
	4	Accounts receivable, net			272,994	4	323,549
	5	Loans and other receivables from current and for	ormer of	ficers, directors,			
		trustees, key employees, and highest compensations	ated em	ployees		_	
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified person	ons (as de	efined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	outing employers and			1	
		sponsoring organizations of section 501(c)(9) voluntary e	s' beneficiary		_		
ats		organizations (see instructions) Complete Part II of Sche		6			
Assets	7	Notes and loans receivable, net			0	7	0
ď	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			25,214	9	10,252
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	152,809			
	b	Less accumulated depreciation	10b	152,809	0	10c	0
	11	Investments—publicly traded securities		1,497,925	11	1,299,787	
	12	Investments—other securities See Part IV, line	1	0	12	0	
	13	Investments—program-related See Part IV, line	0	13	0		
	14	Intangible assets		0	14	0	
	15	Other assets See Part IV, line 11			18,317	15	18,317
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	4)	2,440,937	16	2,343,703
	17	Accounts payable and accrued expenses	_	134,591	17	185,152	
	18	Grants payable			18		
	19	Deferred revenue	_		19		
	20	Tax-exempt bond liabilities]_		20	
	21	Escrow or custodial account liability Complete I		· · · · · · · · · · · · · · · · · · ·		21	ļ
Liabilities	22	Loans and other payables to current and former		l l]
Ħ		trustees, key employees, highest compensated		ees, and	afficiency on the second to end the second terms.		
iab		disqualified persons Complete Part II of Sched				22	
	23	Secured mortgages and notes payable to unrel		·	0	23	0
	24	Unsecured notes and loans payable to unrelate	-		0	24	0
	25	Other liabilities (including federal income tax, pa	-	·			
		parties, and other liabilities not included on lines Part X of Schedule D	\$ 17-24)	Complete	0	25	
	26	Total liabilities. Add lines 17 through 25		 	0 134,591	25 26	185,152
	20				134,391	20	100,102
ຫ		Organizations that follow SFAS 117 (ASC 958		k here ► X and		1	
Ce		complete lines 27 through 29, and lines 33 a	nd 34.				
lar	27	Unrestricted net assets			1,241,333		1,120,095
or Fund Balances	28	Temporarily restricted net assets		-	1,065,013		1,038,456
밀	29	Permanently restricted net assets				29	
Ξ.		Organizations that do not follow SFAS 117 (ASC958),	check he	ere 🕨 🔛 and			
		complete lines 30 through 34.					
Net Assets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or e	quipmer	nt fund		31	
ž A	32	Retained earnings, endowment, accumulated in	ncome, d	or other funds		32	
ž	33	Total net assets or fund balances			2,306,346		2,158,551
_	34	Total liabilities and net assets/fund balances	2,440,937	34	2,343,703		

ouú a	990 (2016) YOUTH LAW CENTER	94	-1715280	Page	e 1 <u>Z</u>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			[<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	,031,	,747
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	,179,	,542
3	Revenue less expenses Subtract line 2 from line 1	3		-147	,795
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	306	,346
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2	,158	<u>,551</u>
art	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				_ <u>_</u> _
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		, ,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				! !
2a	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			l	
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				,
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both			1	
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				ĺ
·	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		[]		
	the Single Audit Act and OMB Circular A-133?		3a		X
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		3b		

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

Name of the	organization					Employer identification	
	AW CENTER					94-171	5280
Part I	Reason for Public Chari						
_	zation is not a private foundati church, convention of churche	· · · · · · · · · · · · · · · · · · ·	•	-			
2 🔲 A	school described in section 1	70(b)(1)(A)(ii). (Atta	ach Schedule E (Form	990 or 99	0-EZ))		
3 🗌 A	hospital or a cooperative hosp	oital service organiz	ation described in sec	tion 170(b)(1)(A)(iii).	
_	medical research organization ospital's name, city, and state:	operated in conjur	nction with a hospital d	escribed ii	n section	170(b)(1)(A)(iii). Ent	er the
	n organization operated for the ection 170(b)(1)(A)(iv). (Com		e or university owned o	or operate	d by a gov	vernmental unit desc	ribed in
6 🗌 A	federal, state, or local governi	ment or government	tal unit described in se	ction 170	(b)(1)(A)(v).	
	in organization that normally releaseribed in section 170(b)(1) (m a gover	nmental u	ınıt or from the gener	at public
8 🗌 A	community trust described in	section 170(b)(1)(A	(Complete Part	1)			
_ 。	n agricultural research organiz r university or a non-land-gran niversity						
10 A	on organization that normally respectively respectively. It is not strictly a compared to the compared by the organization affice.	o its exempt function income and unrelated	ns—subject to certain ed business taxable ind	exception come (less	s, and (2) s section (no more than 33 1/3 511 tax) from busines	% of its
11 🔲 A	n organization organized and	operated exclusively	y to test for public safe	ty See se	ection 509)(a)(4).	
— 。	in organization organized and if one or more publicly support Check the box in lines 12a thro	ed organizations de	scribed in section 509	(a)(1) or s	section 50)9(a)(2). See section	ı 509(a)(3).
a	Type I. A supporting organiz the supported organization(s organization You must com) the power to regu	larly appoint or elect a	y its supp majority o	orted orga of the direc	anization(s), typically ctors or trustees of th	by giving e supporting
b	Type II. A supporting organize control or management of the organization(s) You must c	e supporting organi	zation vested in the sa				
с [Type III functionally integra						rated with,
d [its supported organization(s) Type III non-functionally in						anization(e)
u	that is not functionally integrated integrated in the second integral in the second integral integral integral integral integrated in the second integral in	ated The organizati	ion generally must sati	sfy a distr	ibution re	quirement and an att	entiveness
е 🗌	Check this box if the organiz	ation received a wri	tten determination from	n the IRS	that it is a		e III
	functionally integrated, or Ty		lly integrated supportir	ng organiz	ation		
	nter the number of supported or rovide the following information	•	ed organization(s)				0
	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No	1	
(A)							
(B)							· · · · · · · · · · · · · · · · · · ·
(C)							
(D)							
(E)							
Total		19 年 19 19 19 19 19 19 19 19 19 19 19 19 19	Marin Company of the Company of the Company	表数数点 。		0	0

Schedule A (Form 990 or 990-EZ) 2016 YOUTH LAW CENTER 94-1715

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)

	tion A. Public Support	(2) 2012	(b) 2012	(a) 2014	(d) 2015	(e) 2016	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(u) 2015	(6) 2010	(I) Iotal
1	Gifts, grants, contributions, and		İ	ļ	1		
	membership fees received (Do not include any "unusual grants")	465,323	1,194,310	1,084,000	1,885,173	1,119,265	5,748,071
2	Tax revenues levied for the organization's	400,323	1, 194,510	1,007,000	1,000,110	1,110,200	5,7 10,01 1
-	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	465,323	1,194,310	1,084,000	1,885,173	1,119,265	5,748,071
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)						E 749 074
<u>6</u>	Public support. Subtract line 5 from line 4			!		<u> </u>	5,748,071
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7		465,323	1,194,310	1,084,000	1,885,173	1,119,265	5,748,071
8	Amounts from line 4 Gross income from interest, dividends,	400,323	1, 194,310	1,084,000	1,865,175	1,119,200	5,170,011
•	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	12,854	9,578	3,864	2,724	2,000	31,020
9	Net income from unrelated business	,				7-2	
_	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 VI)		<u>-</u> -				0
11	Total support. Add lines 7 through 10	<u></u>				<u> </u>	5,779,091
12	Gross receipts from related activities, etc. (s	•				12	34,486,671
13	First five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourth	n, or fifth tax year a	is a section 501(c)	(3)	
	organization, check this box and stop here		·			<u> </u>	<u> </u>
_	tion C. Computation of Public Su						00.400/
	Public support percentage for 2016 (line 6, c			f))		14	99 46%
	Public support percentage from 2015 Sched					15	99 27%
16a	33 1/3% support test—2016. If the organization gualifies a			, and line 14 is 33	1/3% or more,		▶ X
	and stop here. The organization qualifies as		•				
D	33 1/3% support test—2015. If the organization gualific				s 33 1/3% or more	e, check this	
47-	box and stop here. The organization qualification				466 - 41 - 4	ā	▶ [
1/a	10%-facts-and-circumstances test—2010 is 10% or more, and if the organization mee	•					
	Part VI how the organization meets the "fact		·		•		
	organization		J	,			▶ [
b	10%-facts-and-circumstances test—2019	5. If the organization	n did not check a b	oox on line 13, 16a,	16b, or 17a, and	line	
	15 is 10% or more, and if the organization m	eets the "facts-and	l-circumstances" te	est, check this box	and stop here. E		
	Part VI how the organization meets the "fact	s-and-circumstance	es" test. The organ	ization qualifies as	a publicly		▶□
4.5	supported organization						▶
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	1/a, or 17b, check	this box and see		

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

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

	4 5 11 6						
	tion A. Public Support	(0) 2012	(b) 2012	(=) 2014	(d) 2015	(e) 2016	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(u) 2015	(e) 2010	(I) IOIAI
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the			1			0
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513 .					i	0
4	Tax revenues levied for the organization's		-			· · · · · · · · · · · · · · · · · · ·	
•	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						 -
9	furnished by a governmental unit to the					ľ	
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
	Amounts included on lines 1, 2, and 3		<u> </u>				
, u	received from disqualified persons						0
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						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from				,		
_	line 6)				ř ,	1 7	0
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6 .	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less					}	
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	0	0	0	0	0	C
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on				<u></u>		
12	Other income Do not include gain or					!	
	loss from the sale of capital assets						_
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,		_	_	_	_ [_
	and 12)	0	0				
14	First five years. If the Form 990 is for the o	rganization's first, s	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)	
_	organization, check this box and stop here						
	tion C. Computation of Public Su					1 45 1	0.000
15	Public support percentage for 2016 (line 8, c		-	(f))		15	0 00%
<u>16</u>	Public support percentage from 2015 Sched					16	0 00%
	tion D. Computation of Investmen					17	0.00%
17	Investment income percentage for 2016 (line			olumn (t))		17	0 00%
18 40-	Investment income percentage from 2015 S			14 and line 45 is ii	nero then 32 4/20/	18	0 00%
туа	33 1/3% support tests—2016. If the organ					and line 17 IS	_
h	not more than 33 1/3%, check this box and s 33 1/3% support tests—2015. If the organ	-				33 1/3% and	
U	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did						

Part IV Supporting Organizations

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

		^		ı Organization:	
CONTIAN A	AII	CHIN	202120	・ ()とのっかけつうけんかん	

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

		Yes	No
ŀ	ı	i	
j	1		
Ì	·	_	
ı			}
ŀ	2		
	3a	-	1
	3b		
	30		
	3с		
	40		
	4a		
	4b		
1			
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	5a		
	5b		- 1
	5c		
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	6		
	7		1
	8		
	9a		
			ا ـــا
	9b		-
	9с		
]	
	10a		<u> </u>
	10b		

Yes No

Yes No

1

2

1

2

3

Yes No

Yes No

С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	ee instrud	ctions,)
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			ı
	those supported organizations and explain how these activities directly furthered their exempt purposes,	{ '		ı
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			ĺ
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the] ,		1
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		L_
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Vos." describe in Part VI the role played by the organization in this regard	26		ĺ

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			ın Part VI) See
instructions. All other Type III non-functionally integrated supporting organ	ızatıc	ons must complete Sections	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		·
6 Portion of operating expenses paid or incurred for production or	1	}	
collection of gross income or for management, conservation, or	ł		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)	<u> </u>		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other	1		
factors (explain in detail in Part VI)	1_		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	0	0
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	İ		
see instructions)	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2	<u> </u>	0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3	4		0
5 Income tax imposed in prior year	5	<u> </u>	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1		
emergency temporary reduction (see instructions)	6	<u></u>	0
7 Check here if the current year is the organization's first as a non-functional	ly int	egrated Type III supporting	organization (see

Part \	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organia	zations (continued)			
Section	n D - Distributions				Current Year		
1	Amounts paid to supported organizations to accomplish ex	хe	mpt purposes				
2	Amounts paid to perform activity that directly furthers exen	np	t purposes of supported	ľ			
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	ations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6	0					
8	Distributions to attentive supported organizations to which	th	ne organization is respor	nsive			
	(provide details in Part VI). See instructions						
9	9 Distributable amount for 2016 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount				0.000		
	ection E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016		
	Distributable amount for 2016 from Section C, line 6	4			0		
	Underdistributions, if any, for years prior to 2016	-					
2	(reasonable cause required—explain in Part VI) See	ı					
	Instructions	4					
3	Excess distributions carryover, if any, to 2016	4					
<u>a</u>	<u> </u>	\dashv					
<u> </u>							
		의					
d		의		 			
		의					
	Total of lines 3a through e	\dashv	0				
	Applied to underdistributions of prior years	-		0			
<u>h</u>	Applied to 2016 distributable amount	-			0		
! -	Carryover from 2011 not applied (see instructions)	_					
	Remainder Subtract lines 3g, 3h, and 3i from 3f	_	0				
4	Distributions for 2016 from	^					
		0		0			
	Applied to underdistributions of prior years	_			0		
	Applied to 2016 distributable amount Remainder Subtract lines 4a and 4b from 4		0		<u> </u>		
5	Remaining underdistributions for years prior to 2016, if	_	<u> </u>				
3	any Subtract lines 3g and 4a from line 2 For result						
	greater than zero, explain in Part VI See instructions			0			
6	Remaining underdistributions for 2016 Subtract lines 3h						
U	and 4b from line 1. For result greater than zero, explain in						
	Part VI See instructions	'			0		
7	Excess distributions carryover to 2017. Add lines 3				<u>_</u>		
•	and 4c		O				
8	Breakdown of line 7	_					
a	Signature of the first of the f	_					
<u>u</u>	Excess from 2013	0		 			
<u>c</u>		0		 			
		0					
	Excess from 2016	0					

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 2016

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Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

• S	section 501(c)(4), (5), or (6) or	rganizations Complete Part III			
Nam	e of organization			Emp	loyer identification number
	JTH LAW CENTER			<u>_</u>	94-1715280
Pai		he organization is exempt und			
1	•	he organization's direct and indirect p	olitical campaign a	activities in Part IV (see	instructions for
_	definition of "political cam	. •			_
2	, .	expenditures (see instructions)		, ▶	\$
	Volunteer hours	ha arranization is available	e cotion FO4/	-\/2\	
1 1		the organization is exempt und excise tax incurred by the organization			
2	· · · · · · · · · · · · · · · · · · ·	excise tax incurred by the organization me			\$
3	•	ed a section 4955 tax, did it file Form	-		Yes No
4a	Was a correction made?	a section 4955 tax, did it life Form	4720 IOI lilis year r		Yes No
	If "Yes," describe in Part I	0.7		•	L les L lo
		he organization is exempt und	ler section 501(c) except section	501(c)(3)
1		expended by the filing organization f			50 1(0)(0):
•	activities	expended by the ming organization i		•	\$
2		iling organization's funds contributed	to other organizati	-	¥
_	527 exempt function activ		10 0 ti / 0 1 g a / 1 1 2 a / 1		\$
3	•	penditures Add lines 1 and 2 Enter h	ere and on Form 1	1120-POL,	
	line 17b			•	\$ 0
4	Did the filing organization	file Form 1120-POL for this year?			\$0
5	Enter the names, address	ses and employer identification numb	er (EIN) of all sect	ion 527 political organiz	zations to which the filing
		ents. For each organization listed, en			
		ntributions received that were prompt			
	as a separate segregated	fund or a political action committee	(PAC) if additiona	r space is needed, prov	ide information in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
					delivered to a separate political organization if
					none, enter -0-
		<u> </u>		 	
(1)					1
<u> </u>				 	
(2)					
(3)					
			ļ	<u> </u>	
(4)				}	1
					
(5)					
(C)					
(6)		l · · · · · · · · · · · · · · · · · · ·	J	J	1

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Codic O (1 01111 000 OI 000 EE) 2010					Page Z
Pa	art II-A Complete if the organize under section 501(h)).	ation is exempt (under section 50	1(c)(3) and filed	Form 5768 (elec	
4	Check ▶	•			_	ıp member's
_	name, address, EIN, € Check ► if the filing organizatio					
_		· · · · · · · · · · · · · · · · · · ·		or provisions ap	1	
	Limits on t (The term "expenditures	obbying Expendit means amounts			(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence	public opinion (gras	ss roots lobbying)		9,854	0
b	Total lobbying expenditures to influence	a legislative body (direct lobbying)		0	0
C	Total lobbying expenditures (add lines 1	a and 1b)			9,854	0
d	Other exempt purpose expenditures				2,169,688	0
е	Total exempt purpose expenditures (add	d lines 1c and 1d)			2,179,542	0
f	Lobbying nontaxable amount Enter the	amount from the fo	llowing table in both	1		
	columns				258,977	0
	If the amount on line 1e, column (a) or (b) is: The lobbyin	g nontaxable amou	nt is:	7 7 7 7	·研究。2007年
[Not over \$500,000	20% of the a	mount on line 1e		* * * * * * * * * * * * * * * * * * * *	ALTO DESCRIPTION
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess	over \$500,000		3
ļ	Over \$1,000,000 but not over \$1,500,000		is 10% of the excess			
ļ	Over \$1,500,000 but not over \$17,000,000		is 5% of the excess o	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				<u> </u>
g	Grassroots nontaxable amount (enter 2	·]	64,744	0
h	Subtract line 1g from line 1a If zero or l	ess, enter -0-		Į	0	0
i	Subtract line 1f from line 1c If zero or le	ess, enter -0-	•			0
j	If there is an amount other than zero on	either line 1h or line	e 1ı, dıd the organız	ation file Form 4720	reporting _r	
	section 4911 tax for this year?					Yes No_
		4-Year Averaging	Period Under sec	tion 501(h)		
	(Some organizations that made	a section 501(h) e	lection do not hav	e to complete all o	f the five columns	below.
	Se	e the separate inst	tructions for lines	2a through 2f.)		
_	Lot	bying Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a	Lobbying nontaxable amount	243,723	265,946	262,716	258,977	1,031,362
b	Lobbying ceiling amount (150% of line 2a, column(e))			• • • • • • • • • • • • • • • • • • • •	~ J	1,547,043
С	Total lobbying expenditures	13,254	12,161	8,581	9,854	43,850
d	Grassroots nontaxable amount	60,931	66,487	65,679	64,744	257,841
е	Grassroots ceiling amount (150% of line 2d, column (e))					386,762
f	Grassroots lobbying expenditures	13 254	12 161	8 581	9 854	43.850

. 1001111	TAM CENTER
Šchedule C (Fo	rm 990 or 990-EZ) 2016
D . II D	0 1 . 4

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has h	NOT filed	Forr	n 5768	,	
	(election under section 501(h)).	(a)		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed emption of the lobbying activity.	Yes	No		nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or	i				Ì
	referendum, through the use of					i
a	Volunteers?	<u> </u>				
b C	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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 .					0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ļ				
b	If "Yes," enter the amount of any tax incurred under section 4912	1				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					- 1
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			- otio -		
Part	Complete if the organization is exempt under section 501(c)(4), section 5	01(0)(5)	, or s	ection		
	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	103	-110
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the price	or vear?		3		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members	o," OR (b) Pai	t III-A,	line 	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		-			
-	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year .		2b			
С	Total		2c			0
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 Part	Taxable amount of lobbying and political expenditures (see instructions) IV Supplemental Information		5			0
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gi	oun list)	Dort II	A lines	1 000	
	e instructions), and Part II-B, line 1. Also, complete this part for any additional information	oup list),	rail 11-	A, IIIIES	rano	ı
						

.SCHEDULE D '(Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2016

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Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

name (or the organization		Employer Identification number
YOU ⁻	TH LAW CENTER		94-1715280
Part		or Advised Funds or Other Similar I	Funds or Accounts.
		vered "Yes" on Form 990, Part IV, line	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		
2	Aggregate value of contributions to (during year) .		·
3			
	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do		
_	funds are the organization's property, subject	•	
6	Did the organization inform all grantees, done		
	used only for charitable purposes and not for		or for any other
	purpose conferring impermissible private ber	nefit?	Yes No
Part	Conservation Easements.		
		vered "Yes" on Form 990, Part IV, line	7
1	Purpose(s) of conservation easements held I		
•	Preservation of land for public use (e.g., reci		n of a historically important land area
	=	· =	
	Protection of natural habitat	Preservatio	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization	tion held a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year	•	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation ease	ements	2b
c	Number of conservation easements on a cer		2c
d	Number of conservation easements included	• • • • • • • • • • • • • • • • • • • •	
u			2d
2	historic structure listed in the National Regist		
3	Number of conservation easements modified	, transferred, released, extinguished, or ter	minated by the organization during
	the tax year		
4	Number of states where property subject to o		
5	Does the organization have a written policy r	- · · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservat		∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforcing	conservation easements during the year
	•		
7	Amount of expenses incurred in monitoring, inspe	ecting, handling of violations, and enforcing con	servation easements during the year
	> \$		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization re	ports conservation easements in its revenu	ie and expense statement, and
	balance sheet, and include, if applicable, the	text of the footnote to the organization's fir	nancial statements that describes
	the organization's accounting for conservation	n easements	
Part		ections of Art, Historical Treasures,	or Other Similar Assets.
		vered "Yes" on Form 990, Part IV, line	
4.			
1a	If the organization elected, as permitted under		
	works of art, historical treasures, or other sin	•	
	of public service, provide, in Part XIII, the tex		
b	If the organization elected, as permitted under	• • • •	
	works of art, historical treasures, or other sin	•	ation, or research in furtherance
	of public service, provide the following amou	<u> </u>	
	(i) Revenue included on Form 990, Part VIII	, line 1	▶ \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of	art, historical treasures, or other similar ass	sets for financial gain, provide the
	following amounts required to be reported ur		
а	Revenue included on Form 990, Part VIII, Iin	• • • •	▶ \$
b	Assets included in Form 990, Part X		▶ \$

Part	Organizations Maintaining	Collections of	Art, Hist	orical Tr	easures, or	r Othe	r Similar Ass	ets (con	<u>tinuec</u>	<u>()</u>
3	Using the organization's acquisition, a	ccession, and other	records, o	check any	of the follows	ng that	are a significant	use of its	3	
	collection items (check all that apply)			_						
а	Public exhibition		d 🔙	Loan	or exchange į	progran	ns			
b	Scholarly research		e 🗌	Other						
C	Preservation for future generation	ons								
4	Provide a description of the organization	on's collections and	explain h	ow they fu	urther the orga	anızatıc	on's exempt purp	ose in Pa	ırt	
5	During the year, did the organization s	olicit or receive don	ations of a	art, histori	cal treasures,	or othe	er sımılar			
	assets to be sold to raise funds rather							Ye	s 🔲	No
Part	IV Escrow and Custodial Arra	angements.								
	Complete if the organization		on Form	990, Pa	rt IV, line 9,	or rep	orted an amou	int on Fo	orm	
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, o	custodian or other in	ntermediar	y for cont	ributions or ot	her ass	sets not			
	included on Form 990, Part X?							Ye	s 🔲	No
b	If "Yes," explain the arrangement in Pa	irt XIII and complete	e the follov	vıng table			···			
	_							Amount		
C	Beginning balance					10				0
d	Additions during the year					10				
e f	Distributions during the year Ending balance					16				0
_	•		4 V 1 0	4 6					s X	
2a	Did the organization include an amoun						•	1e	" [위	No
b	If "Yes," explain the arrangement in Pa	irt XIII Check here	if the expir	anation na	as been provi	ded on	Part XIII		ليا_	
Part		annuared "Vee"	a= Farm	000 Da						
	Complete if the organization	(a) Current year	(b) Pric		(c) Two years		(d) Three years bac	k (a) 50	ur years	hack
1a	Beginning of year balance	(a) Current year		0	(c) Iwo years	O	(u) Three years bac	0	ui years	0
b	Contributions .	<u>_</u>	 			- 		-		
c	Net investment earnings, gains,				 			1		
	and losses							ŀ		
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs						· · · · · · · · · · · · · · · · · · ·			
f	Administrative expenses		ļ							
g	End of year balance	0	<u> </u>	0	<u> </u>	<u> </u>		0]		0
2	Provide the estimated percentage of the	•		line 1g, co	olumn (a)) hel	d as				
a b	Board designated or quasi-endowmen Permanent endowment	%	<u>%</u>							
C	Temporarily restricted endowment	▶ %								
	The percentages on lines 2a, 2b, and		-							
3a	Are there endowment funds not in the	•		n that are	held and ada	ministei	red for the			
	organization by		•						Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related of	_						_3b_		L
4	Describe in Part XIII the intended uses		n's endowr	ment fund	<u> </u>					
Part		•		. 000 - 11-		- 0-	- C 000 D	V !:_	- 10	
	Complete if the organization									
	Description of property	(a) Cost or o			ost or other is (other)		Accumulated depreciation	(d) B	ook valu	e
1a	Land	(,5511	0		0	<u> </u>				0
b	Buildings		0	 	0		0			0
C	Leasehold improvements		0		0		0			0
d	Equipment		0		152,809		152,809			0
е_	Other		0		0		0			0
Total	. Add lines 1a through 1e (Column (d)	must equal Form 99	90, Part X,	column (B), line 10c)		•			0

Schedule D (Form 990) 2016 YOUTH LAW CENTER

94-1715280

Page 2

Schedule D (Fon	m 990) 2016 YOUTH LAW CENTER			94-171 <u>5280</u> Page
² Part VII	Investments—Other Securi			
	Complete if the organization	answered "Yes" on Form 99	90, Part IV, line 11b. See Fo	orm 990, Part X, line 12
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
(1) Financial	derivatives .	0		
(2) Closely-he	eld equity interests	0		
(3) Other				
(B)				
(C)				
(<u>P</u>)				
(F)				
(G)				
(H)				
		•] 0	l	
Part VIII	Investments—Program Rel Complete if the organization		90, Part IV, line 11c See Fo	orm 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-yea	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	<u> </u>	
Part IX	Other Assets.			
	Complete if the organization	answered "Yes" on Form 99	90, Part IV, line 11d See Fo	
		(a) Description		(b) Book value
(2)				
(3)				
(4)				
(5)	·	 		
(6)	· · · · · · · · · · · · · · · · · · ·			
(7) (8)				-
(9)				
	nn (b) must equal Form 990, Part X,	col (B) line 15.)		>
Part X	Other Liabilities.	cor (B) mic 10)	·	·
Tarex	Complete if the organization	answered "Yes" on Form 9	90, Part IV, line 11e or 11f.	See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	T	
	income taxes	(b) Book Value		
(2)	moonio taxos		4	
(3)			1	
(4)	·····		1	
(5)			1	
(6)	A 7474 77		1	
(7)			1	

(8)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Scued	ilie D (Form	990) 2016 YOUTH LAW CENTER		94-171	5280 Page 4
[®] Par	t XI	Reconciliation of Revenue per Audited Financial Stateme	•	Retur	n.
1	Total rev	Complete if the organization answered "Yes" on Form 990, Payenue, gains, and other support per audited financial statements	art IV, line 12a.	1	2,043,027
2		s included on line 1 but not on Form 990, Part VIII, line 12			2,040,02
a		ealized gains (losses) on investments	2a	ŀ	
b		d services and use of facilities	2b	\ \ \	
c		ries of prior year grants	2c		
d		Describe in Part XIII).	2d 11,280		
e		es 2a through 2d	11,200	2e	11,280
3		t line 2e from line 1	•	3	2,031,747
4		s included on Form 990, Part VIII, line 12, but not on line 1	1 1	-	2,031,141
a		ent expenses not included on Form 990, Part VIII, line 7b	4a	ľ	
b		Describe in Part XIII.)	4b		
c	•	es 4a and 4b		4c	(
5		venue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	•	5	2,031,747
	t XII	Reconciliation of Expenses per Audited Financial Statem	onto Mith Exposos p		
rai	LAII	Complete if the organization answered "Yes" on Form 990, Pa		erket	urn.
_	Total av	penses and losses per audited financial statements	artiv, line iza	4-1	2 100 92
1		•		1	2,190,822
2		s included on line 1 but not on Form 990, Part IX, line 25	اما	1	
a		d services and use of facilities	2a	r I	
b		ar adjustments	2b		
C	Other lo		2c		
d		Describe in Part XIII)	2d 11,280		44.000
e		es 2a through 2d	•	2e	11,280
3		t line 2e from line 1	1 1	3	2,179,542
4		s included on Form 990, Part IX, line 25, but not on line 1			
a		ent expenses not included on Form 990, Part VIII, line 7b	4a		
b	•	Describe in Part XIII)	4b		,
C		es 4a and 4b		4c	0.470.544
5		penses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	2,179,54
	t XIII	Supplemental Information.			. =
		escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F			4, Part X, line
2, Pa	art XI, line	s 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to pro	ovide any additional informa	ation	
Part	XI Line 2d	d Special Event Expense			
Part.	XII Line 2	d Special Event Expense			
Part	X Line 2 1	The Center is exempt from federal income tax under Section 501(C)(3) of	of the		
Inter	nal Reven	ue Code In addition, the Center qualifies for the charitable contribution			
dedu	ction und	er Section 170(b)(1)(A)(vi) and has been classified as an organization o	ther		
	-				
than	a private	foundation under Section 509(a)(1) The Center is also exempt from sta	te		
incor	ne taxes i	under Section 23701(d) of the California Revenue and Taxation Code			
	.,,		••••		
Mana	agement t	pelieves the Center has no uncertain tax positions as of December 31, 2	2016		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the

Attach to Form 990 or Form 990-EZ.

organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number YOUTH LAW CENTER 94-1715280

Par		•	_		ered "Yes" on For	m 990, Part IV, Iır	ne 17
	Form 990-EZ filers are not						
1 a	Indicate whether the organization ra Mail solicitations	ised funds throu			ig activities. Check a if non-government g		
a b	Internet and email solicitations		===		of government grants		
c	Phone solicitations		==		raising events	,	
d	In-person solicitations		9 0	peciai iaria	raising events		
2a	Did the organization have a written	or oral agreeme	nt with any	ındividual	(including officers of	firectors trustees o	ır
	key employees listed in Form 990, F						Yes No
b	If "Yes," list the 10 highest paid indiv	riduals or entities	s (fundrais	ers) pursua	ant to agreements u	nder which the fund	raiser is
	to be compensated at least \$5,000 to	by the organizati	on				
		,	, 				
	(i) Name and address of individual			draiser have	(iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid to
	or entity (fundraiser)	(ii) Activity		r control of utions?	from activity	fundraiser listed in col (i)	(or retained by) organization
		 	Yes	No			
1		}					
			[0	0	0
2			{		о	0	0
3					0	0	0
4					0	0	0
5			-				· · · · · · · · · · · · · · · · · · ·
6		<u> </u>	 		0	0	0
7			-		0	0	0
					0	0	0
8					0	0	0
9		ļ			0	0	0
10					0	0	0
		<u> </u>					
Total 3	List all states in which the organizat	ion is registered	or boons	d to collect	opptributions or has		0
3	registration or licensing	ion is registered	Of ficerise	u to solicit	CONTINUUTIONS OF FIRS	been nouned it is e	xempt nom
	-						

		_				
						,
Sche	edule G	(Form 990 or 990-EZ) 2016 Y	OUTH LAW CENTER			94-1715280 Page 2
	irt II		Complete if the organi	zation answered "Yes"	on Form 990, Part IV	
			fundraising event conti			
		events with gross rece	epts greater than \$5,00	00		
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Unsung Hereos		NONE	(add col (a) through col (c))
e l			(event type)	(event type)	(total number)	<u></u>
Revenue	1	Gross receipts	17,415		0	17,415
ě	2	Less Contributions	6,135		0	6,135
}	3	Gross income (line 1				
		minus line 2)	11,280		0	11,280
ł	4	Cash prizes			0	0
	_					
_	5	Noncash prizes			0	0
enses	6	Rent/facility costs			0	0
Direct Expenses	7	Food and beverages			0	0
irec	8	Entertainment			0	0
	^	Other deart surrous	44.000			44 200
[9	Other direct expenses	11,280		0	11,280
- [10	Direct expense summary Add	l lines 4 through 9 in colur	nn (d)	▶	(11,280)
	11	Net income summary Subtract	ct line 10 from line 3, colur	mn (d)		0
Pa	rt III	,	the organization answe	ered "Yes" on Form 99	0, Part IV, line 19, or r	eported more
		than \$15,000 on Form	990-EZ, line 6a			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue				o
ses	2	Cash prizes				0
Expenses	3	Noncash prizes				0
Ī						

3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 1 Yes % Yes % Yes % 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? 1 Yes No	_		O1000 TCVCIIdC	1					
4 Rent/facility costs 5 Other direct expenses (0 Yes % Yes % Yes % Yes % Yes % No No No No No No No No No No No No No		2	Cash prizes						0
5 Other direct expenses Yes	-	3	Noncash prizes				 	<u> </u>	0
Yes % Yes % Yes % Yes Yes		4	Rent/facility costs		<u> </u>				0
6 Volunteer labor No No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? 10 If "No," explain 10 Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? 11 Yes No		5	Other direct expenses						0
8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? 10 If "No," explain 10 Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? 10 Yes No		6	Volunteer labor	1 🛏		% <u> </u>			,
Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No	Ì	7	Direct expense summary Add	d lines 2 through 5 in co	lumn (d)		•	(0)
a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No		8	Net gaming income summary	Subtract line 7 from lin	e 1, colum <u>n (d)</u>		•		0
Oa Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No		a	s the organization licensed to co	onduct gaming activities	in each of these sta	ates?			No
h KINA - II I I		D .	······ explain						
	_		EUNA - III	-	•		•		No No

Schea	ule G (Form 990 or 990-EZ) 2016 YOUTH LAW CENTER	94-1/15280 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity conducted in	
а	The organization's facility	13a %
b	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name ▶	
	Address ▶	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ 0 and the	
	amount of gaming revenue retained by the third party > \$0	
С	If "Yes," enter name and address of the third party	
	Name ▶	
	Address ►	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation > \$ 0	
	Description of services provided	
	Director/officer Employee Independent contractor	
17	Mandatory distributions	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations	
Part	or spent in the organization's own exempt activities during the tax year ► \$ Supplemental Information. Provide the explanations required by Part I, line 2b, column Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional See instructions	
	•	

SÇHEDULE J (Fórm 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

YOUTH LAW CENTER

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

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

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

94-1715280

Par	t I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence		ľ	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee			
4 a	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment?	4a		x
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4ac, list the persons and provide the applicable amounts for each item in Part III	4b 4c		X
5 a b	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Any related organization? If "Yes" on line 5a or 5b, describe in Part III	5a 5b		X
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Х
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III	6b		X_
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on 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)? If "Yes," describe in Part III	8		×
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

YOUTH LAW CENTER Schedule J (Form 990) 2016

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

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

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

Note: The sum of columns (B)(t)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual	Isted	individual must equal t	he total amount of Fo	irm 990, Part VII, Sec	tion A, tine 1a, applica	ible column (D) and (E) amounts for that in	dividual
		(B) Breakdown of W	VV-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable		(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(ı)(g)	in column (B) reported as deferred on prior Form 990
Jennifer Rodriguez	ε	120.844	0	0	4,834	27,940	153,618	0
1 Executive Director	: €	0	0	0	0	0		0
1	€	150.788		0	6,031	000'6	165,819	
2 Senior Director	€	0	0	0	0	0		0
	ε							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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9	€	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
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7	€							
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∞	€	1						
	ε							
6	€							
	€							
10	€							
	ε						1	
11	(ii)							
	Ξ							
12	(ii)							
	Θ							
13	(ii)							
	€				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	
14	<u>(ii</u>							
	Ξ	1					1	
15	(ii)							
	Ξ					,		
16	(ii)							
							Sche	Schedule J (Form 990) 2016

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2016

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection
Employer identification number

YOUTH LAW CENTER	94-1/15280
Form 990, Part III, Line 4c Advocacy Support (continued) - The equal Access Fund supports	
YLC's Fostering Access to Supported Transitions to Adulthood Project, intended to improve	
early adulthood outcomes of transition age (14 to 25) young people involved, at risk of	
involvement or formerly involved in the foster care or juvenile justice systems. The project	
is designed to improve access to transitional supports, services and protections developed to	
assist youth to successfully transition from court supervision to adulthood and independence	
YLC staff provides impact advocacy and advocacy support to qualified legal services programs	
and attorneys representing clients eligible for these programs through co-counseling,	
consultation, research, training and other assistance. The project works on civil legal issues	
facing transition age youth including economic supports, housing, health care, education and	
other transitional support services	
Form 990, Part VI, Section B, Line 11b The audit committee reviews the Form 990 and	
recommends acceptance to the Board of Directors	
Form 990, Part VI, Section B, Line 12c On the inception of requesting a new grant, following	
up on a complaint which might lead to filing a suit or when requested for our name to be added	
to a group who would want or not want a potential policy to be presented, an item in general	
election, there is a general dicussion amongst staff attorneys and the Executive Director If	
needed, the Executive Director would have a discussion with the Chair of the Board of	
Directors before a decision is made	
Form 990, Part VI, Section B, Line 15a The Board of Directors meets in a closed session and	
makes a decision based upon comparable salaries	·
Form 990, Part VI, Section C, Line 19 The governing documents, conflicts of interest policy	
and financial statements are made available upon request	