** PUBLIC DISCLOSURE COPY **

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable: Address change / Name change / Initial return / Terminated / Amended return / Application pending

C Name of organization: TOMORROW'S YOUTH ORGANIZATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): 1356 BEVERLY ROAD — Room/suite: 200

City or town, state or country, and ZIP + 4: MCLEAN, VA 22101-3862

D Employer identification number: 26-1409007

E Telephone number: 703-893-9445

G Gross receipts $ 1,126,406.

F Name and address of principal officer: MARSHA ELLIS
SAME AS C ABOVE

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.TOMORROWSYOUTH.ORG

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2007 M State of legal domicile: VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TOMORROW'S YOUTH ORGANIZATION (TYO) IS A NON-PROFIT, NON-GOVERNMENTAL AMERICAN ORGANIZATION THAT

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	6
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	5
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	518,206.	1,100,023.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	200.	183.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	<275,838.>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	518,406.	824,368.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	204,628.	251,615.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	222,231.	384,460.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	426,859.	636,075.
	19	Revenue less expenses. Subtract line 18 from line 12	91,547.	188,293.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	200,292.	388,797.
	21	Total liabilities (Part X, line 26)	0.	212.
	22	Net assets or fund balances. Subtract line 21 from line 20	200,292.	388,585.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer: Marsha Ellis — Date: 11/15/11

▶ MARSHA ELLIS, TREASURER/DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: LEESA J. E. OWEN — Preparer's signature: Leesa Owen CPA — Date: 11-14-11 — Check ☐ if self-employed — PTIN

Firm's name ▶ CHAPIN, OWEN & SANDSTROM, P.A. — Firm's EIN ▶

Firm's address ▶ 3901 NATIONAL DRIVE SUITE 260
BURTONSVILLE, MD 20866-1189 — Phone no. 301-421-1330

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III .... [X]

1 Briefly describe the organization's mission:
TOMORROW'S YOUTH ORGANIZATION (TYO) IS A NON-PROFIT, NON-GOVERNMENTAL AMERICAN ORGANIZATION THAT IS WORKING TO DEVELOP COMMUNITY CENTERS IN THE MIDDLE EAST SERVING CHILDREN, YOUTH AND THEIR FAMILIES. TYO CENTERS WILL PROVIDE NON-FORMAL EDUCATIONAL ACTIVITIES AND CULTURAL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? .... [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .... [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 150,461. including grants of $) (Revenue $)
CORE CHILD PROGRAM - NABLUS CENTER: THE TYO CORE CHILD PROGRAM OFFERS NON-FORMAL EDUCATION ACTIVITIES IN ART, HEALTH, IT, MUSIC, ENGLISH AND SPORT FOR 4-8 YEAR OLD CHILDREN FROM THE MOST DISADVANTAGED AREAS OF NABLUS, WEST BANK (THREE REFUGEE CAMPS, OLD CITY AND KHALLET AL AMOOD). FULL-TIME TYO TEACHERS DEVELOP THE CURRICULA WITH INPUT FROM UNIVERSITY PROFESSORS, AND A CERTIFIED FAMILY THERAPIST. ALL ACTIVITIES ARE DESIGNED TO TEACH CHILDREN SELF-EXPRESSION, PRACTICAL SKILLS, AND RECREATIONAL COPING STRATEGIES IN A SAFE ENVIRONMENT. YOUTH VOLUNTEERS ARE TRAINED TO SUPPORT TEACHERS IN THE CLASSROOM, PROVIDING POSITIVE ROLE MODELS FOR THE YOUNG CHILDREN. MORE CENTERS ARE BEING PLANNED FOR OTHER DISADVANTAGED AREAS OF THE MIDDLE EAST.

4b (Code:) (Expenses $ 95,719. including grants of $) (Revenue $)
WOMEN'S EMPOWERMENT:
FOSTERING WOMEN ENTREPRENEURS IN NABLUS (FWEN) - THE FWEN PROGRAM, A COLLABORATION BETWEEN TYO AND THE CHERIE BLAIR FOUNDATION FOR WOMEN (CBFW), IS A PILOT PROJECT THAT PROMOTES WOMEN'S ECONOMIC EMPOWERMENT THROUGH THE PROVISION OF CONCRETE TRAINING AND SUPPORT TO HIGH POTENTIAL YOUNG WOMEN IN NABLUS. IN ITS FIRST YEAR OF IMPLEMENTATION, FWEN PROVIDED CUSTOMIZED DEVELOPMENT TRAINING, COACHING, AND CONFIDENCE BUILDING ACTIVITIES LEADING FEMALE, UNIVERSITY GRADUATES TO DEVELOP SUSTAINABLE BUSINESS PLANS, BASED ON THEIR SKILLS, EDUCATION, AND MOTIVATION TO WORK. IMPLEMENTING THESE PLANS WILL ENABLE PARTICIPANTS TO GENERATE MORE INCOME FOR THEMSELVES AND THEIR EMPLOYEES. 23 PARTICIPANTS ENGAGED IN FWEN'S INTENSIVE TRAINING PROGRAM AND CREATED

4c (Code:) (Expenses $ 81,363. including grants of $) (Revenue $)
YOUTH DEVELOPMENT: OVER HALF OF THE POPULATION IN THE MIDDLE EAST, AND PALESTINE, IS UNDER THE AGE OF 25. TYO IS COMMITTED TO ENGAGING THIS IMPORTANT DEMOGRAPHIC, THE LEADERS AND PARENTS OF TOMORROW. THE TYO YOUTH SERVICE LEARNING PROGRAM IS THE IDEAL MEANS TO DO SO, PROVIDING YOUNG PEOPLE WITH A POSITIVE OUTLET FOR THEIR TIME AND ENERGY AS WELL AS PERSONAL AND PROFESSIONAL SKILLS FOR THEIR FUTURE.

YOUTH VOLUNTEER PROGRAM - YOUTH VOLUNTEERS PLAY A VITAL ROLE IN ALL OF TYO'S PROGRAMS. STUDENTS FROM AN NAJAH AND OTHER LOCAL UNIVERSITIES ARE TRAINED IN CHILD DEVELOPMENT AND FACILITATION SKILLS, AND ORIENTED TO TYO'S MISSION. THEN THEY WORK 8-15 HOURS PER WEEK ALONGSIDE PROFESSIONAL TYO TEACHERS. FOR THEIR SERVICE, VOLUNTEERS EARN ACADEMIC

4d Other program services. (Describe in Schedule O.)
(Expenses $ 38,622. including grants of $) (Revenue $)

4e Total program service expenses ▶ 366,165.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		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*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		X
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, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	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, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
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 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 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) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *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 a grant selection committee member, or to a person related to such an individual? *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
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	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* ☐ Yes ☒ No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12			
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 gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file*. (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule 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	
b	If "Yes," enter the name of the foreign country: ▶ OTHER COUNTRY					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
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 and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year — 1a: 6			
b	Enter the number of voting members included in line 1a, above, who are independent — 1b: 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶VA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

[X] Own website [ ] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

MARSHA ELLIS - 703-893-9445
1356 BEVERLY ROAD, SUITE 200, MCLEAN, VA 22101

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
HANI MASRI PRES/EXEC DIRECTOR	35.00	X		X				0.	0.	0.
MARSHA L. ELLIS TREASURER/DIRECTOR	25.00	X		X				0.	0.	0.
KEN FREELING SECRETARY/DIRECTOR	20.00	X		X				0.	0.	0.
PATRICK THEROS DIRECTOR	5.00	X						0.	0.	0.
SAMIA FAROUKI DIRECTOR	5.00	X						0.	0.	0.
AMR BADR DIRECTOR	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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

		(D)	(E)	(F)
1b	Sub-total ▶	0.	0.	0.
c	Total from continuation sheets to Part VII, Section A ▶	0.	0.	0.
d	Total (add lines 1b and 1c) ▶	0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts						
1 a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c	219,805.				
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	880,218.				
g Noncash contributions included in lines 1a-1f: $						
h **Total.** Add lines 1a-1f ▶			1100023.			
Program Service Revenue		Business Code				
2 a						
b						
c						
d						
e						
f All other program service revenue						
g **Total.** Add lines 2a-2f ▶						
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) ▶			183.			183.
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties ▶						
	(i) Real	(ii) Personal				
6 a Gross Rents						
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) ▶						
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss) ▶						
8 a Gross income from fundraising events (not including $ 219,805. of contributions reported on line 1c). See Part IV, line 18	a	26,200.				
b Less: direct expenses	b	302038.				
c Net income or (loss) from fundraising events ▶			<275,838.>			<275838.>
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities ▶						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e **Total.** Add lines 11a-11d ▶						
12 **Total revenue.** See instructions. ▶			824,368.	0.	0.	<275655.>

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	229,966.	130,766.	99,200.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	13,610.	8,516.	5,094.	
10 Payroll taxes	8,039.		8,039.	
11 Fees for services (non-employees):				
a Management				
b Legal	433.	433.		
c Accounting	21,108.		21,108.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	35,022.		35,022.	
12 Advertising and promotion				
13 Office expenses	71,042.	53,512.	17,530.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	51,764.	10,313.	41,451.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,518.	2,518.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	13,323.	11,037.	2,286.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a TRANSPORT. FOR CLASSES	50,021.	50,021.		
b ADVERTISING	29,381.	11,539.	17,842.	
c PROFESSIONAL TRAINING	26,522.	26,522.		
d VOLUNTEER STIPENDS	19,337.	16,633.	2,704.	
e RENT	18,963.		18,963.	
f All other expenses	45,026.	44,355.	671.	
25 **Total functional expenses.** Add lines 1 through 24f	636,075.	366,165.	269,910.	0.
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	112,712.	1	313,087.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 96,667.			
	b	Less: accumulated depreciation — 10b: 24,016.	84,521.	10c	72,651.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,059.	15	3,059.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	200,292.	16	388,797.
Liabilities	17	Accounts payable and accrued expenses		17	212.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	0.	26	212.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	200,292.	27	388,585.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	200,292.	33	388,585.
	34	Total liabilities and net assets/fund balances	200,292.	34	388,797.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	824,368.
2	Total expenses (must equal Part IX, column (A), line 25)	2	636,075.
3	Revenue less expenses. Subtract line 2 from line 1	3	188,293.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	200,292.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	388,585.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☒

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ 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		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
TOMORROW'S YOUTH ORGANIZATION	26-1409007

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I   b ☐ Type II   c ☐ Type III - Functionally integrated   d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of support
Total									

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		52,747.	460,000.	518,206.	1,100,023.	2,130,976.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3		52,747.	460,000.	518,206.	1,100,023.	2,130,976.
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)						947,499.
6 **Public support.** Subtract line 5 from line 4.						1,183,477.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4		52,747.	460,000.	518,206.	1,100,023.	2,130,976.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		23.	356.	299.	183.	861.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						2,131,837.

12 Gross receipts from related activities, etc. (see instructions) | 12 |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ [X]

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) | 14 | %

15 Public support percentage from 2009 Schedule A, Part II, line 14 | 15 | %

16a **33 1/3% support test - 2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [ ]

b **33 1/3% support test - 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [ ]

17a **10% -facts-and-circumstances test - 2010.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ [ ]

b **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ [ ]

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ [ ]

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

** PUBLIC DISCLOSURE COPY **

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

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**

OMB No. 1545-0047

2010

Name of the organization	**Employer identification number**
TOMORROW'S YOUTH ORGANIZATION	26-1409007

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[ ] For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. .... ▶ $ ________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
TOMORROW'S YOUTH ORGANIZATION	26-1409007

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2		$ 7,500.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
3		$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
4		$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
5		$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
6		$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
TOMORROW'S YOUTH ORGANIZATION	26-1409007

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		$ 48,400.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
8		$ 100,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
9		$ 25,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
10		$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
11		$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
12		$ 60,175.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13		$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
14		$ 25,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
15		$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
16		$ 7,852.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
17		$ 75,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
18		$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization

TOMORROW'S YOUTH ORGANIZATION

Employer identification number

26-1409007

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19		$ 99,973.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
20		$ 125,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
21		$ 24,200.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
22		$ 9,600.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
23		$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
24		$ 8,438.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25		$ 39,960.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
26		$ 24,560.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
27		$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
28		$ 19,604.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
29		$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
30		$ 9,800.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization

TOMORROW'S YOUTH ORGANIZATION

Employer identification number

26-1409007

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31		$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
32		$ 74,961.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
TOMORROW'S YOUTH ORGANIZATION	26-1409007

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Part III **Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than $1,000 for the year.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization: TOMORROW'S YOUTH ORGANIZATION
Employer identification number: 26-1409007

Part I — Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II — Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ________

4 Number of states where property subject to conservation easement is located ▶ ________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

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 XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III — Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ ______ %
b Permanent endowment ▶ ______ %
c Term endowment ▶ ______ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		949.	47.	902.
d Equipment		95,718.	23,969.	71,749.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				72,651.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	824,368.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	636,075.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	188,293.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	188,293.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Part I — General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
MIDDLE EAST	1	16	PROGRAM SERVICE YOUTH CENTER	YOUTH CENTER FOR DISADVANTAGED YOUTHS. SEE PART IV FOR FURTHER DESCRIPTION.	366,165.
3 a Sub-total	1	16			366,165.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	16			366,165.

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule F (Form 990) 2010**

032071
12-20-10

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 ▶ ☐

Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

3 Enter total number of other organizations or entities ▶

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☒ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☒ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

THE FIRST YOUTH CENTER IN WEST BANK OFFERS NON-FORMAL EDUCATIONAL ACTIVITIES IN ART, HEALTH, IT, MUSIC, ENGLISH & SPORTS FOR 4 - 8 YEAR OLD CHILDREN FROM THE MOST DISADVANTAGED AREAS OF NABLUS. THE CENTER FACILITIES ARE PROVIDED BY AN NAJAH UNIVERSITY AND INCLUDE 14 CLASSROOMS, OFFICES, A CONFERENCE ROOM AND DORMITORY ACCOMODATIONS FOR UP TO 20.

FULL-TIME TYO TEACHERS AT THE NABLUS CENTER DEVELOP THE CIRRICULA WITH INPUT FROM UNIVERSITY PROFESSORS AND A CERTIFIED FAMILY THERAPIST. ALL ACTIVITIES ARE DESIGNED TO TEACH CHILDREN SELF-EXPRESSION, PRACTICAL SKILLS & RECREATIONAL COPING STRATEGIES IN A SAFE ENVIRONMENT.

UNIVERSITY-AGED VOLUNTEERS ARE TRAINED AT THE NABLUS CENTER UNDER THE TYO INTERN PROGRAM TO SUPPORT TEACHERS IN THE CLASSROOM, PROVIDING POSITIVE ROLE MODELS FOR THE YOUNG CHILDREN.

TYO OFFERS WOMEN'S ENTREPRENEURSHIP PROGRAMS WITH SUPPORT FROM THE CHERIE BLAIR FOUNDATION FOR WOMEN AND OTHER LEADING ORGANIZATIONS IN NABLUS AND LEBANON. THESE PROGRAMS PROVIDE CUSTOMIZED BUSINESS DEVELOPMENT TRAINING, COACHING, AND CONFIDENCE-BUILDING ACTIVITIES FOR HIGH-POTENTIAL YOUNG WOMEN TO DEVELOP VIABLE BUSINESS PLANS BASED ON THEIR SKILLS, EDUCATION, AND MOTIVATION TO WORK. BY STARTING THEIR OWN BUSINESS, PARTICIPANTS GENERATE INCOME FOR THEMSELVES AND OTHER FEMALE EMPLOYEES THUS IMPROVING THE ECONOMIC SITUATION OF FAMILIES AND THE BROADER COMMUNITY.

FURTHER, BASIC KNOWLEDGE ABOUT HEALTH AND CHILD DEVELOPMENT, COMBINED WITH SELF-CONFIDENCE AND OTHER LIFE SKILLS, REPRESENTS HUGE VALUE ADDED FOR THESE WOMEN AND THEIR CHILDREN AND FAMILIES. TYO OFFERS EDUCATIONAL

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

AND RECREATIONAL PROGRAMS FOR MOTHERS THAT SUPPORT THEIR PERSONAL HEALTH AND HAPPINESS, WHICH DIRECTLY IMPACTS THE FAMILY'S WELFARE AND MULTIPLIES THE IMPACT AND SUSTAINABILITY OF TYO'S EFFORTS.

THOUGH COMMUNITY OUTREACH, TYO NABLUS ENDEAVORS TO BECOME A MEANINGFUL PART OF THE LOCAL AND GLOBAL COMMUNITY.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open To Public Inspection

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Total ▶						

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

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

Schedule G (Form 990 or 990-EZ) 2010

032081 01-13-11

15401114 759586 373 2010.04050 TOMORROW'S YOUTH ORGANIZATI 373____1

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 ANNUAL GALA (event type)	(b) Event #2 CAFE MILANO HOSTED EVENT (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	238,335.	7,670.		246,005.
	2 Less: Charitable contributions	213,935.	5,870.		219,805.
	3 Gross income (line 1 minus line 2)	24,400.	1,800.		26,200.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	80,688.	25,000.		105,688.
	8 Entertainment	2,250.			2,250.
	9 Other direct expenses	194,100.			194,100.
	10 Direct expense summary. Add lines 4 through 9 in column (d)			▶	(302,038.)
	11 Net income summary. Combine line 3, column (d), and line 10			▶	<275,838.>

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)			▶	( )
	8 Net gaming income summary. Combine line 1, column d, and line 7			▶	

9 Enter the state(s) in which the organization operates gaming activities: ______

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: ______

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: ______

11 Does the organization operate 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 operated in:

a 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 ▶ $ ______ and the amount of gaming revenue retained by the third party ▶ $ ______ .

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
TOMORROW'S YOUTH ORGANIZATION	26-1409007

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IS WORKING TO DEVELOP COMMUNITY CENTERS IN THE MIDDLE EAST SERVING CHILDREN, YOUTH AND THEIR FAMILIES. TYO CENTERS WILL PROVIDE NON-FORMAL EDUCATIONAL ACTIVITIES AND CULTURAL AND RECREATIONAL RESOURCES THAT ARE CURRENTLY UNAVAILABLE IN COMMUNITIES THEY SERVE. BEYOND THE CORE PROGRAM TARGETED AT UNDERPRIVILEGED 4- TO 8-YEAR-OLDS, TYO WILL WELCOME ALL COMMUNITY MEMBERS FOR A VARIETY OF EDUCATIONAL, RECREATIONAL, AND CULTURAL PROGRAMS AND EVENTS. INTERNATIONAL AND LOCAL TYO STAFF WILL WORK CLOSELY WITH THE LOCAL COMMUNITY BEFORE OPENING THE CENTER TO ENSURE THAT THE ACTIVITIES OFFERED RESPOND TO LOCAL NEEDS AND INTERESTS, AS WELL AS ADVANCING THE TYO MISSION.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND RECREATIONAL RESOURCES THAT ARE CURRENTLY UNAVAILABLE IN COMMUNITIES THEY SERVE. BEYOND THE CORE PROGRAM TARGETED AT UNDERPRIVILEGED 4- TO 8-YEAR-OLDS, TYO WILL WELCOME ALL COMMUNITY MEMBERS FOR A VARIETY OF EDUCATIONAL, RECREATIONAL, AND CULTURAL PROGRAMS AND EVENTS. INTERNATIONAL AND LOCAL TYO STAFF WILL WORK CLOSELY WITH THE LOCAL COMMUNITY BEFORE OPENING THE CENTER TO ENSURE THAT THE ACTIVITIES OFFERED RESPOND TO LOCAL NEEDS AND INTERESTS, AS WELL AS ADVANCING THE TYO MISSION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
CORE PROGRAM CHILDREN COME TO TYO 4 TIMES WEEKLY DURING 8-WEEK SESSIONS TOTALING ABOUT 100 PROGRAM HOURS PER CHILD.

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

ART: A VARIETY OF ARTS AND CRAFTS ACTIVITIES PROVIDE A FORUM TO EXPLORE TOPICS LIKE FAMILY AND IDENTITY, OFFERING AN OUTLET FOR CHILDREN TO EXPRESS THEIR HOPES, FEARS, SUCCESSES AND PAIN.

ENGLISH: INTERNATIONAL INTERNS LEAD IMMERSION CLASSES TO TEACH CHILDREN BASIC VOCABULARY AND EXPRESSIONS IN ENGLISH, OFFERING A FUN CULTURAL EXCHANGE AND A HEAD START ON THEIR ENGLISH STUDIES IN SCHOOL.

HEALTH: ACTIVITIES RELATED TO NUTRITION, PERSONAL HYGIENE, SELF-ESTEEM AND IDENTITY PROMOTE HEALTHY DEVELOPMENT OF CHILDREN'S BODIES AND MINDS.

IT: THE FUTURE KIDS CURRICULUM HELPS CHILDREN TO BECOME COMFORTABLE WITH THE BASIC COMPUTING SKILLS THAT WILL BE ESSENTIAL TO THEIR ACADEMIC AND PROFESSIONAL SUCCESS. THESE PRACTICAL SKILLS ALSO CONTRIBUTE TO CHILDREN'S SELF-CONFIDENCE AND CAPACITY TO CONNECT WITH OTHERS BEYOND THEIR IMMEDIATE COMMUNITY.

MUSIC: MAKING INSTRUMENTAL AND VOCAL MUSIC TEACHES CHILDREN RHYTHM AND PROVIDES THEM WITH AN IMPORTANT FORM OF SELF-EXPRESSION.

SPORT: INDIVIDUAL AND GROUP ACTIVITIES TEACH CHILDREN MOTOR SKILLS, COORDINATION, TEAMWORK AND HEALTHY COMPETITION. SPORTS CLASS ALSO PROVIDES A SAFE CONTEXT FOR PHYSICAL ACTIVITY WHICH MOST OF OUR CHILDREN HAVE NO OTHER ACCESS TO.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

19 BUSINESS PLANS. THE 19 PLANS WERE REVISED BY PROJECT PARTNERS AND

Name of the organization: TOMORROW'S YOUTH ORGANIZATION | Employer identification number: 26-1409007

THE PROJECT'S STEERING COMMITTEE COMPOSED OF LOCAL PUBLIC AND PRIVATE SECTOR LEADERS. THE FWEN STEERING COMMITTEE SELECTED 10 PROJECTS FOR INCUBATION BY TYO, INCLUDING: ASSISTANCE WITH FINANCING, CONNECTIONS TO MARKETS AND MENTORS, AND PERSONAL SUPPORT. AMERICAN, SMALL BUSINESS EXPERT AND USA TODAY COLUMNIST, STEVE STRAUSS, GAVE PERSONALIZED TRAINING SPONSORED BY THE US CONSULATE TO FWEN PARTICIPANTS. MARTIN KAYE (CBFW TRUSTEE) AND NICOLA COBBOLD (PORTLAND TRUST) VISITED FWEN AT TYO'S NABLUS CENTER. THE WOMEN BEHIND THE 10 LEADING BUSINESS PLANS DISPLAYED THEIR BUSINESS CONCEPTS IN AN EXHIBITION THAT SHOWCASED SAMPLE PRODUCTS TO THE VISITORS AND RECEIVED PERSONALIZED FEEDBACK AND SUGGESTIONS.

MOTHERS SUPPORT - A FITNESS CLASS FOR MOTHERS PROVIDES A HEALTHY ESCAPE FROM STRESSFUL AND EXHAUSTING LIVES. THROUGH THESE PROGRAMS, WE OFFER ADULTS THE RESOURCES NECESSARY TO REACH THEIR INDIVIDUAL POTENTIAL AND THEREBY RAISE HEALTHIER AND HAPPIER CHILDREN. TYO ALSO WORKS TO PROVIDE SKILLS AND INFORMATION DIRECTLY RELATED TO CHILD DEVELOPMENT. MOTHERS IN PARTICULAR COME TO THE TYO CENTER FOR ACTIVITIES LIKE PARENTING AND FIRST AID CLASSES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CREDIT AND A TUITION GRANT, AS WELL AS INVALUABLE PRACTICAL EXPERIENCE AND TRAINING. THESE YOUNG PEOPLE ARE AN INTEGRAL PART OF THE TYO COMMUNITY, SERVING OTHER MEMBERS BUT ALSO GENERATING THEIR OWN ACTIVITIES INCLUDING COMMUNITY SERVICE PROJECTS, SOCIAL EVENTS AND ACADEMIC NETWORKS. AS WELL AS ITS MANY BENEFITS FOR PARTICIPANTS, THE YOUTH SERVICE LEARNING PROGRAM PROVIDES TYO CHILDREN WITH ROLE MODELS WHO PROVIDE POSITIVE, INDIVIDUALIZED ATTENTION IN THE CLASSROOM AND

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

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BEYOND.

AN NAJAH UNIVERSITY (WWW.NAJAH.EDU) HAS OFFERED A GREAT DEAL OF ASSISTANCE IN THE ESTABLISHMENT OF TYO NABLUS AND THEIR STUDENTS HAVE BEEN AN INVALUABLE ADDITION TO THE TYO TEAM. ITS PROFESSORS PLAY AN IMPORTANT ROLE IN THE DEVELOPMENT OF TYO CURRICULA, AND AN NAJAH STUDENTS MAKE UP THE MAJORITY OF TYO'S YOUTH VOLUNTEER CORPS. WE ARE GRATEFUL FOR AN NAJAH'S ONGOING SUPPORT OF AND ACTIVE PARTICIPATION IN TYO'S WORK.

TRIPLE EXPOSURE PROGRAM - TRIPLE EXPOSURE AIMS TO DEVELOP IDENTITY, AWARENESS, AND VOCATIONAL SKILLS AMONG CHILDREN AND ADOLESCENTS THROUGH TEACHING PHOTOGRAPHIC EXPRESSION AND THE PRODUCTION OF PUBLIC ART. TRIPLE EXPOSURE COMBINES TWO COMPONENTS: PUBLIC ART, WHICH ENGAGES CHILDREN IN PRODUCING MURALS AT THE TYO CENTER AND AROUND THE CITY THAT EXPRESS THEIR VISIONS OF NABLUS, PALESTINE, AND THEIR OWN LIVES AND PHOTOGRAPHY, WHICH ENABLES CHILDREN TO LEARN THE TECHNIQUES AND CAPACITIES OF DIGITAL CAMERAS THAT THEY TAKE HOME TO CAPTURE THEIR LIVES. THROUGH THE POWER OF THE IMAGE, TRIPLE EXPOSURE STUDENTS EXPRESS THEIR HOPES, LOVES, FEARS, AND CONCERNS. DURING 2010, MURAL STUDENTS LEARNED THE ESSENTIALS OF DRAWING, PAINTING, AND COMPOSITION AND PAINTED MURALS AROUND TYO AND NABLUS AS WELL AS THE TRADITIONAL PALESTINIAN HANDCRAFT OF MOSAIC ART AND PRODUCED TWO STUNNING, MOSAIC MURALS THAT DEPICT THEIR VISIONS OF PALESTINE. THE FIRST MURAL, "REPRESENTATIONS OF PALESTINE", MADE ENTIRELY OF GLASS AND CERAMIC TILES DONATED BY TILE SHOPS IN NABLUS, RAMALLAH, AND HEBRON, DEPICTS PALESTINE'S BEAUTIFUL OLIVE TREES THAT THE CHILDREN ASSOCIATE WITH THEIR HOME. THE SECOND MURAL, "KITE-FLYING AMONG THE HILLS OF PALESTINE, DEPICTS THE NATURAL ASPECTS OF THEIR HOME OF WHICH THE

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

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CHILDREN ARE SO PROUD, ALONG WITH ONE OF THEIR FAVORITE GAMES. PROFESSIONAL PHOTOGRAPHER, HASSAN QAMHIA, VISITED TYO TO SPEAK TO PHOTOGRAPHY CLASSES. PHOTOGRAPHY STUDENTS EXHIBITED THEIR WORK IN "SUWARNA (OUR PICTURES)" AT THREE LOCATIONS: HASHIMIYA SCHOOL IN EL BIREH/RAMALLAH, HAMDI MUNKO CNETER IN NABLUS, AND RAMALLAH OTTOMAN COURT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMUNITY OUTREACH: IT IS ESSENTIAL TO TYO'S SUCCESS THAT WE ARE ACCEPTED BY AND BECOME A MEANINGFUL PART OF THE LOCAL AND GLOBAL COMMUNITY. LOCALLY, WE INVITE ALL COMMUNITY MEMBERS TO OPEN DAY EVENTS AND COLLABORATE WITH OTHER ORGANIZATIONS IN NABLUS. FINALLY, WE ARE HONORED TO SHARE OUR NABLUS CONSTITUENTS' STORY WITH THE REST OF THE WORLD THROUGH A VARIETY OF MEDIA AND EVENTS AROUND THE WORLD.

THE NATIONAL CHILDREN'S MUSEUM (WWW.NCM.MUSEUM) IN WASHINGTON DC AND TYO SHARE A PASSION FOR ENGAGING AND EMPOWERING CHILDREN. NCM, LIKE TYO, OFFERS EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR CHILDREN AND FAMILIES THAT INSPIRE CHILDREN TO CARE ABOUT AND IMPROVE THE WORLD. THROUGH ITS INTERACTIVE EXHIBITS, ONLINE COMMUNITY, AND UNIQUE NATIONAL PROGRAMS AND PARTNERSHIPS, NCM IS TRANSFORMING THE CONCEPT OF A TRADITIONAL MUSEUM BY BECOMING A CATALYST TO INSPIRE AND EMPOWER KIDS TO SPEAK UP, TAKE ACTION, AND GET ENGAGED IN THEIR COMMUNITIES. THROUGH 2013, NCM IS OPERATING AS A MUSEUM WITHOUT WALLS, PARTICIPATING IN A VARIETY OF COMMUNITY EVENTS AND WORKING WITH OTHER ARTS AND CULTURAL ORGANIZATIONS TO DEVELOP CREATIVE PARTNERSHIPS THAT BENEFIT KIDS AND FAMILIES.

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

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KALIMATINA - KALIMATINA IS A SIX-MONTH DO-PLOMACY INITIATIVE IN WHICH SEVERAL YOUNG PALESTINIANS AND AMERICANS CREATED A BY YOUTH, FOR YOUTH MULTIMEDIA KIT TO INTRODUCE THE CULTURE OF NABLUS TO THE WORLD AND PROVIDE CONCRETE OUTLETS FOR ENGAGEMENT. THE PROJECT ALSO GENERATED TWO OTHER IMPORTANT OUTCOMES:

DEEP PERSON TO PERSON CONNECTIONS ACROSS DIVIDES WITHIN AND BETWEEN NABLUS AND THE US,

A MODEL FOR YOUTH DRIVEN CULTURAL DIPLOMACY THAT CAN BE REPLICATED ANYWHERE IN THE WORLD.

THE DO-PLOMACY MANUAL IS DESIGNED BY YOUTH TO TEACH OTHER YOUTH ABOUT THEIR CULTURE IN A WAY THAT IS RELEVANT, AUTHENTIC AND DISSOLVES PREJUDICE. THE IMPORTANCE OF YOUTH-LED, CROSS CULTURAL CONNECTIONS IS ALSO REFLECTED IN THE PROJECT'S NAME KALIMATINA, WHICH MEANS "OUR WORD" IN ARABIC. THIS TOOL ADDRESSES OUR CHALLENGE IN NABLUS OF BEING ISOLATED FROM THE REST OF THE WORLD AND THE GROWING DIVIDES BETWEEN THE MIDDLE EAST AND NORTH AMERICA AND EUROPE. BECAUSE OF OUR INNOVATIVE, MODERN AND SCALABLE APPROACH, THE PROJECT ALSO REPRESENTS MAJOR POTENTIAL FOR ADVANCEMENT IN INTERCULTURAL DIALOGUE: A TOPIC THAT IS NOW INDISPENSABLE FOR GLOBAL SECURITY AND WELL-BEING.

ONCE THE MANUAL IS COMPLETE, AMERICAN TYO INTERNS WILL LEAD DO-PLOMACY SESSIONS, DIRECTLY REACHING AT LEAST 360 YOUTH IN THE US. HOWEVER, OUR TARGET IS TRULY THE WORLD - TYO COMMITS GREAT ENERGY TO SPREADING THE CONCEPT AND OUR MANUAL AS FAR AND WIDE AS POSSIBLE. OUR COLLABORATION WITH THE UNITED NATIONS ALLIANCE OF CIVILIZATIONS AND OTHER GLOBAL ORGANIZATIONS, AS WELL AS OUTREACH TO RELEVANT STUDENT GROUPS IN THE US AND EUROPE PROVIDES A LARGE AND DIVERSE AUDIENCE FOR THE KIT. SOCIAL

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

MEDIA OUTLETS LIKE FACEBOOK, YOUTUBE AND TWITTER ARE IMPORTANT PLATFORMS FOR DO-PLOMACY, TO FACILITATE RESOURCE-SHARING, ONGOING REVISION OF THE KIT AND ACTIVE ENGAGEMENT.

INTERNATIONAL INTERN PROGRAM: EACH SEMESTER TYO RECRUITS HIGHLY QUALIFIED AMERICAN AND INTERNATIONAL INTERNS TO WORK AND LIVE AT THE TYO NABLUS CENTER. INTERNS COME FROM DIVERSE ACADEMIC AND PROFESSIONAL BACKGROUNDS, BUT ALL BRING SOMETHING UNIQUE TO SHARE WITH THE NABLUS COMMUNITY. IN 2010, TYO HOSTED 12 INTERNATIONAL INTERNS WHO TAUGHT A TOTAL OF 25 CLASSES TO MORE THAN 500 PARTICIPANTS.

EXPENSES $ 38,622. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

FORM 990, PART VI, SECTION A, LINE 2: HANI MASRI, THE PRESIDENT AND A DIRECTOR OF TYO, HAS THE FOLLOWING BUSINESS RELATIONSHIPS WITH MARSHA ELLIS, THE TREASURER AND A DIRECTOR OF TYO: (1) HANI MASRI IS THE PRESIDENT OF THE CAPITAL CORPORATION, WHICH EMPLOYS MARSHA ELLIS AS A FULLTIME OFFICE MANAGER; AND (2) HANI MASRI IS THE PRESIDENT OF M2 INVESTORS, INC., A CORPORATION FOR WHICH MARSHA ELLIS IS THE SECRETARY AND TREASURER.

ADDITIONALLY, HANI MASRI, THE PRESIDENT AND A DIRECTOR OF TYO, HAS THE FOLLOWING BUSINESS RELATIONSHHIP WITH PATRICK THEROS, A DIRECTOR OF TYO: HANI MASRI IS THE PRESIDENT OF M2 INVESTORS, INC. AND PATRICK THEROS IS A PARTNER IN SM1, LLC. M2 INVESTORS, INC. AND SM1, LLC ARE EQUAL PARTNERS IN M5 INVESTORS, LLC, WHICH IS TREATED AS A PARTNERSHIP FOR U.S. FEDERAL INCOME TAX PURPOSES AND SPECIALIZES IN BUSINESS CONSULTING AND INVESTING IN QATAR.

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION AMENDED THE ARTICLES OF INCORPORATION AS FOLLOWS: TO PROVIDE CULTURAL AND EDUCATIONAL SERVICES TO CHILDREN, ADOLESCENTS, YOUNG ADULTS, AND WOMEN IN THE MIDDLE EAST AND ELSEWHERE.

FORM 990, PART VI, SECTION A, LINE 8B: THE COMMITTEES OF THE BOARD OF DIRECTORS DO NOT HAVE THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. THEREFORE, DOCUMENTATION OF COMMITTEE ACTIVITY IS HANDLED THROUGH THE MINUTES OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11: THE PROCESS FOR FORM 990 REVIEW PRIOR TO FILING IS A MANAGEMENT FUNCTION AT TYO. IT IS REVIEWED BY THE TREASURER AS WELL AS THE PRESIDENT/EXECUTIVE DIRECTOR PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION RELIES UPON THE INTEGRITY AND HONESTY OF EACH MEMBER OF GOVERNANCE AND MANAGEMENT. IF THE ORGANIZATION BECOMES AWARE OF A CONFLICT IT ASKS THE INDIVIDUAL(S) TO RECUSE THEMSELVES.

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S FORM 990 AND FORM 1023 ARE AVAILABLE TO THE PUBLIC UPON REQUEST. ADDITIONALLY, THE ORGANIZATION'S FORM 990 IS ON THE WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE GENERALLY NOT PROVIDED TO THE PUBLIC,

FORM 990, PART XI, LINE 2A:

Name of the organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

COMPILED STATEMENTS

AS OF THE FORM 990 FILING DATE, THE COMPILED STATEMENTS HAVE NOT YET BEEN ISSUED.

TOMORROW'S YOUTH ORGANIZATION [373]
Net Book Value - Depreciation

Financial

01/01/2010 - 12/31/2010

	Asset Balances				Reductions						
System No.	Beginning Balance	Additions	Deletions	Ending Balance	Beg. Accum. Depreciation	Current Depreciation	Sec. 179/ Bonus	Other Reductions	Deletion Reductions	Total Reductions	Net Book Value
NABLUS - CENTER											
COMPUTER EQUIPMENT											
Subtotal: COMPUTER EQUIPMENT	14,737.43	1,171.65	0.00	15,909.08	1,473.74	3,064.66	0.00	0.00	0.00	4,538.40	11,370.68
Less dispositions and exchanges:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: COMPUTER EQUIPMENT	14,737.43	1,171.65	0.00	15,909.08	1,473.74	3,064.66	0.00	0.00	0.00	4,538.40	11,370.68
FURNITURE & OFFICE EQUIPMENT											
Subtotal: FURNITURE & OFFICE EQUIPMENT	2,015.75	280.29	0.00	2,296.04	428.99	293.85	0.00	0.00	0.00	722.84	1,573.20
Less dispositions and exchanges:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: FURNITURE & OFFICE EQUIPMENT	2,015.75	280.29	0.00	2,296.04	428.99	293.85	0.00	0.00	0.00	722.84	1,573.20
LEASEHOLD IMPROVEMENTS											
Subtotal: LEASEHOLD IMPROVEMENTS	949.29	0.00	0.00	949.29	23.33	24.34	0.00	0.00	0.00	47.67	901.62
Less dispositions and exchanges:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: LEASEHOLD IMPROVEMENTS	949.29	0.00	0.00	949.29	23.33	24.34	0.00	0.00	0.00	47.67	901.62
OTHER FIXTURES AND EQUIPMENT											
Subtotal: OTHER FIXTURES AND EQUIPMENT	6,516.00	0.00	0.00	6,516.00	2,574.28	1,091.73	0.00	0.00	0.00	3,666.01	2,849.99
Less dispositions and exchanges:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: OTHER FIXTURES AND EQUIPMENT	6,516.00	0.00	0.00	6,516.00	2,574.28	1,091.73	0.00	0.00	0.00	3,666.01	2,849.99
TRANSPORTATION EQUIPMENT											
Subtotal: TRANSPORTATION EQUIPMENT	59,060.00	0.00	0.00	59,060.00	3,281.11	6,562.22	0.00	0.00	0.00	9,843.33	49,216.67
Less dispositions and exchanges:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

TOMORROW'S YOUTH ORGANIZATION [373]
Net Book Value - Depreciation
Financial

01/01/2010 - 12/31/2010

	Asset Balances				Reductions						
System No.	Beginning Balance	Additions	Deletions	Ending Balance	Beg. Accum. Depreciation	Current Depreciation	Sec. 179/ Bonus	Other Reductions	Deletion Reductions	Total Reductions	Net Book Value
NABLUS - CENTER											
Net for: TRANSPORTATIO N EQUIPMENT	59,060.00	0.00	0.00	59,060.00	3,281.11	6,562.22	0.00	0.00	0.00	9,843.33	49,216.67
Subtotal: NABLUS - CENTER	83,278.47	1,451.94	0.00	84,730.41	7,781.45	11,036.80	0.00	0.00	0.00	18,818.25	65,912.16
Less dispositions and exchanges:											
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: NABLUS - CENTER	83,278.47	1,451.94	0.00	84,730.41	7,781.45	11,036.80	0.00	0.00	0.00	18,818.25	65,912.16

TOMORROW'S YOUTH ORGANIZATION [373]
Net Book Value - Depreciation
Financial
01/01/2010 - 12/31/2010

	Asset Balances				Reductions						
System No.	Beginning Balance	Additions	Deletions	Ending Balance	Beg. Accum. Depreciation	Current Depreciation	Sec. 179/ Bonus	Other Reductions	Deletion Reductions	Total Reductions	Net Book Value
US - VA OFFICE											
COMPUTER EQUIPMENT											
Subtotal: COMPUTER EQUIPMENT	11,936.81	0.00	0.00	11,936.81	2,912.67	2,285.50	0.00	0.00	0.00	5,198.17	6,738.64
Less dispositions and exchanges:											
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: COMPUTER EQUIPMENT	11,936.81	0.00	0.00	11,936.81	2,912.67	2,285.50	0.00	0.00	0.00	5,198.17	6,738.64
Subtotal: US - VA OFFICE	11,936.81	0.00	0.00	11,936.81	2,912.67	2,285.50	0.00	0.00	0.00	5,198.17	6,738.64
Less dispositions and exchanges:											
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net for: US - VA OFFICE	11,936.81	0.00	0.00	11,936.81	2,912.67	2,285.50	0.00	0.00	0.00	5,198.17	6,738.64
Subtotal:	95,215.28	1,451.94	0.00	96,667.22	10,694.12	13,322.30	0.00	0.00	0.00	24,016.42	72,650.80
Less dispositions and exchanges:											
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Grand Totals:	95,215.28	1,451.94	0.00	96,667.22	10,694.12	13,322.30	0.00	0.00	0.00	24,016.42	72,650.80

TOMORROW'S YOUTH ORGANIZATION [373]
Depreciation Expense
Financial
01/01/2010 - 12/31/2010

System No.	S	Description	Date In Service	Method / Conv.	Life	Cost / Other Basis	Bus./ Inv. %	Salvage/ Basis Adj.	Beg. Accum. Depreciation/ (Sec. 179)	Current Depreciation	Total Depreciation/ (Sec. 179)
		NABLUS - CENTER									
		Computer Equipment									
5		10 DELL INSPIRON, LAPTOP AND PRINTER FOR LAB	6/21/2009	ADS / HY	5.0000	7,545.00	100.0000	0.00	754.50	1,509.00	2,263.50
7		COMPUTER EQUIPMENT - MILLENIUM	7/28/2009	ADS / HY	5.0000	1,117.00	100.0000	0.00	111.70	223.40	335.10
10		COMPUTER EQUIPMENT - NILE.COM	10/18/2009	ADS / HY	5.0000	4,088.00	100.0000	0.00	408.80	817.60	1,226.40
11		COMPUTER EQUIPMENT - MILLENIUM	11/25/2009	ADS / HY	5.0000	1,221.00	100.0000	0.00	122.10	244.20	366.30
12		COMPUTER EQUIPMENT - MILLENIUM	12/16/2009	ADS / HY	5.0000	766.43	100.0000	0.00	76.64	153.29	229.93
16		DELL LAPTOP - H. WAKILI	8/23/2010	ADS / HY	5.0000	1,171.65	100.0000	0.00	0.00	117.17	117.17
		Subtotal: Computer Equipment				15,909.08		0.00	1,473.74	3,064.66	4,538.40
		Less dispositions and exchanges:				0.00		0.00	0.00	0.00	0.00
		Net for: Computer Equipment				15,909.08		0.00	1,473.74	3,064.66	4,538.40
		Leasehold Improvements									
14		RENOVATIONS TO CENTER KITCHEN	1/18/2009	MSL / MM	9.0000	949.29	100.0000	0.00	23.33	24.34	47.67
		Subtotal: Leasehold Improvements				949.29		0.00	23.33	24.34	47.67
		Less dispositions and exchanges:				0.00		0.00	0.00	0.00	0.00
		Net for: Leasehold Improvements				949.29		0.00	23.33	24.34	47.67
		Office Furniture and Equipment									
4		COPY MACHINE	4/8/2008	M / HY	5.0000	698.32	100.0000	0.00	363.12	134.08	497.20
6		COMPUTER TABLES, DESKS FOR COMPUTER LAB	6/10/2009	ADS / HY	0.0000	1,317.43	100.0000	0.00	65.87	131.74	197.61
17		CONFERENCE ROOM TABLE	12/8/2010	ADS / HY	5.0000	280.29	100.0000	0.00	0.00	28.03	28.03
		Subtotal: Office Furniture and Equipment				2,296.04		0.00	428.99	293.85	722.84
		Less dispositions and exchanges:				0.00		0.00	0.00	0.00	0.00
		Net for: Office Furniture and Equipment				2,296.04		0.00	428.99	293.85	722.84
		Other Equipment and Fixtures									
8		TREADMILL	9/18/2008	M / HY	5.0000	1,201.00	100.0000	0.00	624.52	230.59	855.11
9		APPLIANCES	9/28/2008	M / HY	5.0000	3,583.00	100.0000	0.00	1,863.16	687.94	2,551.10
13		BEDS AND CABINETS FOR APT	5/19/2009	ADS / HY	0.0000	1,732.00	100.0000	0.00	86.60	173.20	259.80
		Subtotal: Other Equipment and Fixtures				6,516.00		0.00	2,574.28	1,091.73	3,666.01

TOMORROW'S YOUTH ORGANIZATION [373]
Depreciation Expense
Financial

01/01/2010 - 12/31/2010

System No.	S	Description	Date In Service	Method / Conv.	Life	Cost / Other Basis	Bus./ Inv. %	Salvage/ Basis Adj.	Beg. Accum. Depreciation/ (Sec. 179)	Current Depreciation	Total Depreciation/ (Sec. 179)
NABLUS - CENTER											
		Less dispositions and exchanges:				0.00		0.00	0.00	0.00	0.00
		Net for: Other Equipment and Fixtures				6,516.00		0.00	2,574.28	1,091.73	3,666.01
Transportation Equipment											
		CHILDREN'S BUS-NABLUS									
3			6/4/2009	ADS / HY	9.0000	59,060.00	100.0000	0.00	3,281.11	6,562.22	9,843.33
		Subtotal: Transportation Equipment				59,060.00		0.00	3,281.11	6,562.22	9,843.33
		Less dispositions and exchanges:				0.00		0.00	0.00	0.00	0.00
		Net for: Transportation Equipment				59,060.00		0.00	3,281.11	6,562.22	9,843.33
		Subtotal: NABLUS - CENTER				84,730.41		0.00	7,781.45	11,036.80	18,818.25
		Less dispositions and exchanges:				0.00		0.00	0.00	0.00	0.00
		Net for: NABLUS - CENTER				84,730.41		0.00	7,781.45	11,036.80	18,818.25

TOMORROW'S YOUTH ORGANIZATION [373]
Depreciation Expense
Financial

01/01/2010 - 12/31/2010

System No.	S	Description	Date In Service	Method / Conv.	Life	Cost / Other Basis	Bus./ Inv. %	Salvage/ Basis Adj.	Beg. Accum. Depreciation/ (Sec. 179)	Current Depreciation	Total Depreciation/ (Sec. 179)
US - VA OFFICE											
Computer Equipment											
		WAF IMAC COMPUTER									
1			12/31/2007	M / MQ	5.0000	1,440.00	100.0000	0.00	930.24	203.90	1,134.14
		MAC LAPTOP									
2			8/11/2008	M / HY	5.0000	2,220.83	100.0000	0.00	1,154.83	426.40	1,581.23
		MT608CAP COMPUTER EQUIPMENT									
15			6/16/2009	ADS / HY	5.0000	8,275.98	100.0000	0.00	827.60	1,655.20	2,482.80
Subtotal: Computer Equipment						11,936.81		0.00	2,912.67	2,285.50	5,198.17
Less dispositions and exchanges:						0.00		0.00	0.00	0.00	0.00
Net for: Computer Equipment						11,936.81		0.00	2,912.67	2,285.50	5,198.17
Subtotal: US - VA OFFICE						11,936.81		0.00	2,912.67	2,285.50	5,198.17
Less dispositions and exchanges:						0.00		0.00	0.00	0.00	0.00
Net for: US - VA OFFICE						11,936.81		0.00	2,912.67	2,285.50	5,198.17
Subtotal:						96,667.22		0.00	10,694.12	13,322.30	24,016.42
Less dispositions and exchanges:						0.00		0.00	0.00	0.00	0.00
Grand Totals:						96,667.22		0.00	10,694.12	13,322.30	24,016.42

Form **8868** (Rev. January 2011) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print

File by the due date for filing your return. See instructions.

Name of exempt organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Number, street, and room or suite no. If a P.O. box, see instructions.: 1356 BEVERLY ROAD, NO. 200

City, town or post office, state, and ZIP code. For a foreign address, see instructions.: MCLEAN, VA 22101-3862

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ MARSHA ELLIS 1356 BEVERLY ROAD, SUITE 200 - MCLEAN, VA 22101

Telephone No.▶ 703-893-9445 FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ [X] calendar year 2010 or

▶ [ ] tax year beginning ______ , and ending ______ .

2 If the tax year entered in line 1 is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$ 0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ 0.

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

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print

File by the extended due date for filing your return. See instructions.

Name of exempt organization: TOMORROW'S YOUTH ORGANIZATION

Employer identification number: 26-1409007

Number, street, and room or suite no. If a P.O. box, see instructions.: 1356 BEVERLY ROAD, NO. 200

City, town or post office, state, and ZIP code. For a foreign address, see instructions.: MCLEAN, VA 22101-3862

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ MARSHA ELLIS 1356 BEVERLY ROAD, SUITE 200 - MCLEAN, VA 22101
  Telephone No. ▶ 703-893-9445 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2011.

5 For calendar year 2010 , or other tax year beginning ______ , and ending ______.

6 If the tax year entered in line 5 is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS REQUIRED IN ORDER TO OBTAIN ALL INFORMATION NEEDED FOR PREPARATION OF A COMPLETE FORM 990.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$ 0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$ 0.
c	**Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$ 0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Ellen E. Horner Title ▶ CPA Date ▶ 8/2/11

023842
01-24-11

CM#7010 0780 0000 5850 0717

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