

Form **990**

Return of Organization Exempt From Income Tax

2008

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2008 calendar year, or tax year beginning OCT 1, 2008 and ending SEP 30, 2009

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

Please use IRS label or print or type.
 See Specific Instructions.

C Name of organization
YOUTH SCIENCE INSTITUTE
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
296 GARDEN HILL DRIVE
 City or town, state or country, and ZIP + 4
LOS GATOS, CA 95032

D Employer identification number
94-1265213

E Telephone number
(408) 356-4945

G Gross receipts \$ **1,468,372.**

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)

F Name and address of principal officer: **SUSANNE MULCAHY**
SAME AS C ABOVE

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

J Website: **WWW.YSI-CA.ORG**

K Type of organization: Corporation Trust Association Other

L Year of formation: **1953** **M State of legal domicile:** **CA**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO INSPIRE ENTHUSIASM FOR SCIENCE AND A LOVE OF LEARNING		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	15
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5	Total number of employees (Part V, line 2a)	5	88
	6	Total number of volunteers (estimate if necessary)	6	200
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	2,077.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	1,077.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 600,622.	Current Year 683,172.
	9	Program service revenue (Part VIII, line 2g)	567,001.	566,389.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,851.	2,311.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<69,964.>	4,867.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,105,510.	1,256,739.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	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)	805,648.	769,164.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	34,942.	33,503.
16b		Total fundraising expenses (Part IX, column (D), line 25)	181,640.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	395,336.	390,616.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,235,926.	1,193,283.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	<130,416.>	63,456.
	20	Total assets (Part X, line 16)	Beginning of Year 2,643,853.	End of Year 2,554,113.
	21	Total liabilities (Part X, line 26)	905,075.	753,577.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,738,778.	1,800,536.

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 _____ Date _____
SUSANNE MULCAHY, EXECUTIVE DIRECTOR
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature **LAWRENCE S. KUECHLER** Date **07/13/10** Check if self-employed Preparer's identifying number (see instructions) _____
 Firm's name (or yours if self-employed), address, and ZIP + 4 **BERGER/LEWIS ACCOUNTANCY CORP.**
55 ALMADEN BLVD., STE 600
SAN JOSE, CA 95113 EIN _____ Phone no. **(408) 494-1200**

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

TO INSPIRE ENTHUSIASM FOR SCIENCE AND A LOVE OF LEARNING

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 No

Yes 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 No

Yes 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.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 596,366. including grants of \$) (Revenue \$ 201,134.)

DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2009, THE INSTITUTE TAUGHT 30,605 CHILDREN IN ITS SCHOOL PROGRAMS, AFTER-SCHOOL PROGRAMS, SUMMER CAMPS, AND PUBLIC EVENTS.

SCHOOL AND GROUP PROGRAMS

YOUTH SCIENCE INSTITUTE (YSI) REACHES THE GREATEST NUMBER OF CHILDREN THROUGH ITS SCHOOL PROGRAMS. CURRENTLY, FEES CHARGED FOR THESE PROGRAMS COVER ONLY 45% OF YOUTH SCIENCE INSTITUTE'S COST OF DELIVERY. NOT A SINGLE CLASSROOM REQUESTING A PROGRAM WAS TURNED AWAY FOR LACK OF FUNDS. IN 2009, 27,852 STUDENTS CAME TO THE INSTITUTE WITH THEIR CLASSROOM TEACHER OR COMMUNITY, A 9% INCREASE OVER LAST YEAR. 33% OF

4b (Code:) (Expenses \$ 203,692. including grants of \$) (Revenue \$ 348,912.)

SUMMER SCIENCE CAMPS

EACH YEAR MORE THAN 1,500 PRE-K THROUGH 6TH GRADE STUDENTS ATTEND HALF-DAY SUMMER SCIENCE CAMP AT YOUTH SCIENCE INSTITUTE'S SCIENCE AND NATURE CENTERS. MORE THAN 120 HANDS-ON, SMALL-GROUP OUTDOOR CAMPS ARE OFFERED, SUCH AS FEATHERS, FUR AND SCALES, PHUNKY PHYSICS AND DEEP EARTH/DEEP SPACE. IN 2009, 46 CAMPER SCHOLARSHIPS WERE PROVIDED (A 4% INCREASE OVER THE PREVIOUS YEAR), AND NO ONE REQUESTING A SCHOLARSHIP FOR AT LEAST ONE WEEK OF CAMP WAS TURNED AWAY. YOUTH SCIENCE INSTITUTE'S INSTRUCTOR TO CAMPER RATIOS MEET OR EXCEED THOSE RECOMMENDED BY THE AMERICAN CAMP ASSOCIATION'S ACCREDITATION PROGRAM.

4c (Code:) (Expenses \$ 11,500. including grants of \$) (Revenue \$ 13,074.)

AFTER-SCHOOL SCIENCE CLASSES

OFFERED WEEKLY DURING THE SCHOOL YEAR AT YOUTH SCIENCE INSTITUTE VASONA, THESE ENRICHING CLASSES INCORPORATE MATH, SCIENCE, ART, MUSIC AND LANGUAGE INTO SMALL-GROUP, HANDS-ON ACTIVITIES. 500 STUDENTS ARE ENROLLED BY THEIR FAMILIES EACH YEAR.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 3,210. including grants of \$) (Revenue \$ 3,269.)

4e Total program service expenses \$ 814,768. (Must equal Part IX, Line 25, column (B).)

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		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 U.S.? <i>If "Yes," complete Schedule F, Part I</i>		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? <i>If "Yes," complete Schedule F, Part II</i>		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? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>		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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a	4		
1b	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?	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	88		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
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)?		X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and 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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
d	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8	N/A		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
a	N/A		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
b	N/A		
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12		
a	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
b	10b		
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders		
a	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
b	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		
b	N/A		
b	12b		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

		Yes	No
<i>For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</i>			
1a	Enter the number of voting members of the governing body		15
b	Enter the number of voting members that are independent		15
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?		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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?		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?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	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?	X	
b	Other officers or key employees of the organization?	X	
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?		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?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **CA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website 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: **DAWN GERDT - 408-356-4945**
296 GARDEN HILL DRIVE, LOS GATOS, CA 95032

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
NANCY VALBY PAST PRESIDENT	2.00	X					0.	0.	0.	
MARK LOHBECK PRESIDENT	2.00	X		X			0.	0.	0.	
GIL DECKER VICE PRESIDENT	2.00	X		X			0.	0.	0.	
VALERIE BALL SECRETARY & TREASURER	2.00	X		X			0.	0.	0.	
RON BARRETT, PH.D. DIRECTOR	2.00	X					0.	0.	0.	
NEILA M. BRENKE DIRECTOR	2.00	X					0.	0.	0.	
DIANE M. CASEY, PH.D. DIRECTOR	2.00	X					0.	0.	0.	
ROD CARPENTER DIRECTOR	2.00	X					0.	0.	0.	
ED CORREIA DIRECTOR	2.00	X					0.	0.	0.	
RYAN DE LA TORRE DIRECTOR	2.00	X					0.	0.	0.	
MISSY ESTRADE DIRECTOR	2.00	X					0.	0.	0.	
DANIELLE METZ DIRECTOR	2.00	X					0.	0.	0.	
KAY MORLAN DIRECTOR	2.00	X					0.	0.	0.	
NIVY PADHY DIRECTOR	2.00	X					0.	0.	0.	
PATTI ALONGI-PALMER DIRECTOR	2.00	X					0.	0.	0.	
VIDYA SUNDARAM DIRECTOR	2.00	X					0.	0.	0.	
JO SCHWEIZER DIRECTOR	2.00	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	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LARRY WALKER DIRECTOR	2.00	X					0.	0.	0.	
SUSANNE MULCAHY EXECUTIVE DIRECTOR	50.00			X			89,250.	0.	6,459.	
DAWN GERDT CO-FINANCE DIRECTOR	25.00			X			30,326.	0.	0.	
PATRICE WILLIAMS CO-FINANCE DIRECTOR	25.00			X			30,326.	0.	0.	
1b Total							149,902.	0.	6,459.	

2 Total number of individuals (including those in 1a) 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		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		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		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 those in 1) 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	8,590.				
	c	Fundraising events	1c	7,450.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	73,300.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	593,832.				
	g	Noncash contributions included in lines 1a-1f: \$		176,904.				
	h	Total. Add lines 1a-1f		683,172.				
	Program Service Revenue	2 a	PROGRAM FEES	Business Code 611600	566,389.	566,389.		
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f		566,389.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,667.			2,667.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	10,500.				
			(ii) Personal					
			b	Less: rental expenses	7,644.			
			c	Rental income or (loss)	2,856.			
	d	Net rental income or (loss)		2,856.		2,077.	779.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	30,228.				
			(ii) Other					
			b	Less: cost or other basis and sales expenses	30,584.			
			c	Gain or (loss)	<356.>			
	d	Net gain or (loss)		<356.>			<356.>	
	8 a	Gross income from fundraising events (not including \$ 7,450. of contributions reported on line 1c). See Part IV, line 18	a	2,655.				
			b	Less: direct expenses	2,755.			
c			Net income or (loss) from fundraising events		<100.>		<100.>	
9 a	Gross income from gaming activities. See Part IV, line 19	a						
		b	Less: direct expenses					
		c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a	170,650.					
		b	Less: cost of goods sold	170,650.				
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code					
11 a	OTHER INCOME	453220	2,111.			2,111.		
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		2,111.					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		1,256,739.	566,389.	2,077.	5,101.		

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	168,854.	40,132.	110,777.	17,945.
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	507,936.	485,901.	15,928.	6,107.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	37,234.	32,204.	4,342.	688.
10 Payroll taxes	55,140.	42,820.	10,344.	1,976.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	17,700.		17,700.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	33,503.			33,503.
f Investment management fees				
g Other	61,509.	47,595.	10,208.	3,706.
12 Advertising and promotion	3,322.	1,247.	1,350.	725.
13 Office expenses	51,709.	36,383.	3,047.	12,279.
14 Information technology	8,330.	5,009.	3,162.	159.
15 Royalties				
16 Occupancy	10,446.	9,708.	675.	63.
17 Travel	8,677.	6,250.	2,139.	288.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,199.	813.	2,361.	25.
20 Interest	39,470.	4,642.	923.	33,905.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	103,434.	80,931.	234.	22,269.
23 Insurance	11,641.	135.	11,506.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a THRIFT SHOP OPERATIONS	47,392.			47,392.
b REPAIRS AND MAINTENANCE	10,249.	9,764.	472.	13.
c ANIMAL CARE	4,883.	4,883.		
d MISCELLANEOUS	4,282.	2,332.	1,438.	512.
e SITE IMPROVEMENTS	1,698.	1,578.	120.	
f All other expenses	2,675.	2,441.	149.	85.
25 Total functional expenses. Add lines 1 through 24f	1,193,283.	814,768.	196,875.	181,640.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. 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	463.	1	513.
	2 Savings and temporary cash investments	163,639.	2	142,502.
	3 Pledges and grants receivable, net	94,797.	3	21,377.
	4 Accounts receivable, net	30,553.	4	17,347.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	46,748.	8	42,662.
	9 Prepaid expenses and deferred charges	5,823.	9	12,169.
	10a Land, buildings, and equipment: cost basis ... 10a 2,831,361.			
	b Less: accumulated depreciation. Complete Part VI of Schedule D ... 10b 557,360.			
		2,301,830.	10c	2,274,001.
	11 Investments - publicly traded securities		11	43,542.
	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		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,643,853.	16	2,554,113.	
Liabilities	17 Accounts payable and accrued expenses	59,095.	17	60,731.
	18 Grants payable		18	
	19 Deferred revenue	27,548.	19	25,558.
	20 Tax-exempt bond liabilities		20	
	21 Escrow 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	818,432.	23	667,288.
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	905,075.	26	753,577.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,604,874.	27	1,685,029.
	28 Temporarily restricted net assets	120,864.	28	102,467.
	29 Permanently restricted net assets	13,040.	29	13,040.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	1,738,778.	33	1,800,536.
	34 Total liabilities and net assets/fund balances	2,643,853.	34	2,554,113.

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 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?	X	
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?		X
b If "Yes," did the organization undergo the required audit or audits?		

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization YOUTH SCIENCE INSTITUTE	Employer identification number 94-1265213
--	---

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: (Please check only **one** organization.)

- 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)**. (Attach Schedule H.)
- 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 the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 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
11g(i)		
11g(ii)		
11g(iii)		

 - (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?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the organizations the organization supports.

(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?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	585,208.	461,408.	600,456.	600,622.	683,172.	2930866.
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	218,500.	250,375.	403,750.	334,200.	334,200.	1541025.
4 Total. Add lines 1 - 3	803,708.	711,783.	1004206.	934,822.	1017372.	4471891.
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)						
6 Public Support. Subtract line 5 from line 4.						4471891.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	803,708.	711,783.	1004206.	934,822.	1017372.	4471891.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,367.	1,502.	20,377.	7,851.	2,667.	42,764.
9 Net income from unrelated business activities, whether or not the business is regularly carried on				2,467.	2,856.	5,323.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1,896.	2,647.	4,372.	1,656.	2,111.	12,682.
11 Total support. Add lines 7 through 10						4532660.
12 Gross receipts from related activities, etc. (see instructions)					12	3,636,449.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	98.66 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.34 %
16a 33 1/3% support test - 2008. 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	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2007. 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	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. 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	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. 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	<input type="checkbox"/>	
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	<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2008

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. 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 - 2007. 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

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, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

For organizations 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 Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/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 Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization YOUTH SCIENCE INSTITUTE	Employer identification number 94-1265213
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>4</u>		\$ <u>55,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>2</u>		\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>3</u>		\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>5</u>		\$ <u>19,448.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

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

	Held at the End of the Year
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	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds?

Yes No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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, 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, 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 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 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 Trust, Escrow and Custodial Arrangements. Complete if 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 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	13,040.				
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	13,040.				

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment %
 - b Permanent endowment 100.00 %
 - 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		X
(ii) related organizations		X
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 Investments - 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) Depreciation	(d) Book value
1a Land		500,000.		500,000.
b Buildings	40,139.	374,522.	72,566.	342,095.
c Leasehold improvements		1,605,408.	315,308.	1,290,100.
d Equipment		76,665.	46,126.	30,539.
e Other		234,627.	123,360.	111,267.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				2,274,001.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,256,739.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,193,283.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	63,456.
4	Net unrealized gains (losses) on investments	<1,698.>
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4-8	<1,698.>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	61,758.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1,521,156.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	<1,698.>
b	Donated services and use of facilities	367,926.
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	
e	Add lines 2a through 2d	366,228.
3	Subtract line 2e from line 1	1,154,928.
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	101,811.
b	Other (Describe in Part XIV)	
c	Add lines 4a and 4b	101,811.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	1,256,739.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	1,459,398.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	367,926.
b	Prior year adjustments	
c	Losses reported on Form 990, Part IX, line 25	
d	Other (Describe in Part XIV)	100.
e	Add lines 2a through 2d	368,026.
3	Subtract line 2e from line 1	1,091,372.
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	101,911.
b	Other (Describe in Part XIV)	
c	Add lines 4a and 4b	101,911.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	1,193,283.

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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART III, LINE 1A: COLLECTION ITEMS ACQUIRED EITHER THROUGH PURCHASE OR DONATION ARE NOT CAPITALIZED. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IF PURCHASED WITH UNRESTRICTED ASSETS AND AS DECREASES IN TEMPORARILY RESTRICTED OR PERMANENTLY RESTRICTED NET ASSETS IF PURCHASED WITH DONOR-RESTRICTED ASSETS. CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE STATEMENTS OF ACTIVITIES. PROCEEDS FROM DEACCESSIONS OR INSURANCE RECOVERIES ARE REFLECTED ON THE STATEMENTS OF ACTIVITIES BASED ON THE ABSENCE OR

Part XIV Supplemental Information (continued)

EXISTENCE AND NATURE OF DONOR-IMPOSED RESTRICTIONS.

THE ORGANIZATION CHANGED ACCOUNTING POLICIES RELATED TO COLLECTIONS BY ADOPTING ASC 958 (FORMERLY SFAS NO. 116, ACCOUNTING FOR CONTRIBUTIONS RECEIVED AND CONTRIBUTIONS MADE) OPTION OF RECOGNIZING NO COLLECTION ITEMS ON ITS STATEMENT OF FINANCIAL POSITION IN THE YEAR ENDED SEPTEMBER 30, 2008. ACCORDINGLY, THE ACCOUNTING CHANGE HAS BEEN RETROSPECTIVELY APPLIED TO PRIOR PERIODS PRESENTED AS IF THE POLICY HAD ALWAYS BEEN USED.

PART III, LINE 4: YOUTH SCIENCE INSTITUTE HAS A COLLECTION OF ANIMAL SKINS AND MOUNTS, BIRD MOUNTS, ROCKS AND OTHER GEOLOGICAL ARTIFACTS, NATIVE AMERICAN ARTIFACTS, AND OTHER NATURE-BASED TEACHING MATERIALS OF VALUE, THAT HAVE BEEN DONATED TO OR PURCHASED BY THE INSTITUTE SINCE 1953.

A PORTION OF THE OVERALL COLLECTION IS ON DISPLAY AT THE INSTITUTE'S THREE SCIENCE AND NATURE CENTERS. A SIGNIFICANT PORTION IS IN STORAGE DUE TO LACK OF DISPLAY SPACE. THE INSTITUTE DOES NOT CURRENTLY HAVE A STAFF CURATOR; CARE AND INVENTORY OF THE COLLECTION IS TAKEN CARE OF BY STAFF ON AN AS-NEEDED BASIS. CONTRIBUTIONS OR PURCHASES OF ITEMS FOR THE COLLECTION ARE NOT REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS SINCE THE INSTITUTE DOES NOT CAPITALIZE COLLECTIONS.

PART V, LINE 4: TO PROVIDE SCHOLARSHIPS TO DESERVING CHILDREN FOR PROGRAMS PROVIDED BY THE YOUTH SCIENCE INSTITUTE.

PART X: IN JUNE 2006, THE FASB ISSUED ASC 740-10 (FORMERLY INTERPRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF FASB STATEMENT NO. 109, (FIN 48)). ASC 740-10 PROVIDES

Part XIV Supplemental Information (continued)

GUIDANCE ON RECOGNITION AND MEASUREMENT OF UNCERTAINTIES IN INCOME TAXES RECOGNIZED IN FINANCIAL STATEMENTS BY PRESCRIBING A MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN. ON DECEMBER 30, 2008 THE FASB ISSUED ASC 740-10-65 (FORMERLY FASB STAFF POSITION (FSP) FIN 48-3) WHICH ALLOWS FOR THE DEFERRAL OF ASC 740-10 UNTIL FISCAL YEARS BEGINNING AFTER DECEMBER 15, 2008.

IN ACCORDANCE WITH THIS PROVISION, THE INSTITUTE ELECTED TO DEFER THE APPLICATION OF ASC 740-10. BASED ON MANAGEMENT'S ANALYSIS OF THE INSTITUTE'S TAX POSITIONS, THE ACCOUNTING FOR ANY UNCERTAINTY IN ITS TAX POSITIONS IS NOT EXPECTED TO HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES: -100.

THRIFT SHOP OPERATIONS: 101911.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES: 100.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

THRIFT SHOP OPERATIONS: 101911.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less: Charitable contributions			
	3	Gross revenue (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Other direct expenses			
	8	Direct expense summary. Add lines 4 through 7 in column (d)			()
	9	Net income summary. Combine lines 3 and 8 in column (d)			()

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))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				()
8	Net gaming income summary. Combine lines 1 and 7 in column (d)				()

	Yes	No
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?	9a	
b If "No," Explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain: _____		
11 Does the organization operate gaming activities with nonmembers?	11	
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?	12	

		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	13a	%	
b An outside facility	13b	%	
14 Provide 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?			
15a			
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:			
Name ▶ _____			
Address ▶ _____			
16 Gaming manager information:			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			

<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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?			
17a			
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

2008
Open to Public
Inspection

▶ Attach to Form 990.

Name of the organization **YOUTH SCIENCE INSTITUTE** Employer identification number **94-1265213**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		166,564	RESALE VALUE
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution (historic structures)				
14	Qualified conservation contribution (other)				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	1	1,550	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>SUPPLIES AND</u>)	X	4	6,135	FMV
26	Other ▶ (<u>AUCTION ITEMS</u>)	X	8	2,655	FMV
27	Other ▶ ()				
28	Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

THESE STUDENTS CAME FROM TITLE 1 SCHOOLS AND ARE ON FREE LUNCH

PROGRAMS, 28% OF THE STUDENTS WERE ENGLISH LANGUAGE LEARNERS (ELL).

YSI PROGRAMS FILL THE GAP THAT IS PRESENT IN SCIENCE EDUCATION TODAY BY ACTIVELY ADDRESSING THE GROWING SCIENCE EDUCATION CRISIS IN OUR SCHOOLS. CLASSROOM TEACHERS CHOOSE YSI PROGRAMS BECAUSE THEY PROVIDE SCIENCE EDUCATION ACTIVITIES THAT THEY THEMSELVES CANNOT PROVIDE. IN MANY CLASSROOMS, A YOUTH SCIENCE INSTITUTE PROGRAM IS THE ONLY HANDS-ON SCIENCE THE CHILDREN WILL EXPERIENCE.

YOUTH SCIENCE INSTITUTE SURVEYS EACH TEACHER THAT RECEIVES A PROGRAM. RESULTS CONSISTENTLY SHOW OVERWHELMINGLY SUPPORT FOR ALL OF YOUTH SCIENCE INSTITUTE'S OFFERINGS WITH EXCEPTIONAL RATINGS FOR PROGRAM CONTENT AND DELIVERY, AVERAGING 4.9 OUT OF 5 OVERALL. AN AVERAGE OF 88% OF TEACHERS RETURN YEAR AFTER YEAR. MULTIPLE FACTORS INFLUENCED TEACHERS' CHOICE OF YOUTH SCIENCE INSTITUTE PROGRAMS; YEAR AFTER YEAR MORE THAN 90% OF TEACHERS SURVEYED NOTED MORE THAN ONE REASON THEY CHOOSE YOUTH SCIENCE INSTITUTE.

STRATEGIC PARTNERSHIP PROGRAM: XILINX ECOSYSTEM

THIS YEAR MARKED YOUTH SCIENCE INSTITUTE'S THIRD YEAR AS A FOUNDING PARTNER IN XILINX CORPORATION'S MULTI-SCHOOL, MULTI-AGENCY, LONG-TERM COLLABORATION SERVING OSTER ELEMENTARY, UNION MIDDLE, AND LEIGH HIGH SCHOOLS IN SAN JOSE. THIS XILINX-FUNDED COLLABORATION FEATURES

NONPROFITS FROM THE AREAS OF SCIENCE, TECHNOLOGY, THE ARTS, ATHLETICS

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

AND COACHING, STUDENT HEALTH AND WELLNESS, AND TEACHER DEVELOPMENT.

THIS EFFECTIVE AND UNIQUE PARTNERSHIP AMONG INDUSTRY, NONPROFITS, AND

EDUCATION HAS GAINED INTERNATIONAL ATTENTION AND SEVERAL PRESTIGIOUS

AWARDS; WORK IS CURRENTLY BEING DONE TO SCALE AND REPLICATE THE MODEL,

WHICH IS ALREADY IN SEVERAL XILINX CORPORATE LOCATIONS IN THE U.S. AND

ABROAD. SEVERAL SILICON VALLEY CORPORATIONS HAVE EXPRESSED INTEREST IN

LAUNCHING THEIR OWN "ECOSYSTEM" PARTNERSHIPS FOR EDUCATION.

STRATEGIC PARTNERSHIP PROGRAM: DIGGING DEEPER COLLABORATIVE

YOUTH SCIENCE INSTITUTE IS ACTIVE IN THE "DIGGING DEEPER"

COLLABORATIVE, WHICH ENHANCES SCIENCE EDUCATION OPPORTUNITIES FOR TITLE

1 SCHOOLS TO OFFER CONCENTRATED AND COORDINATED NATURAL SCIENCE

EDUCATION. THE PROGRAM LINKS THESE ORGANIZATIONS IN A LOGICAL FASHION

SO THAT EACH PROVIDES A FOUNDATION FOR THE OTHER, ACHIEVING GREATER

EDUCATIONAL DEPTH WITH MINIMAL ADDITIONAL RESOURCES. THE INSTITUTE

CURRENTLY SERVES GEORGE MAYNE SCHOOL IN ALVISO, WHERE 69% OF STUDENTS

ARE ON THE FREE/REDUCED LUNCH PROGRAM AND 49% ARE ENGLISH LANGUAGE

LEARNERS.

TEACHER TRAINING

YOUTH SCIENCE INSTITUTE PROVIDES IN-DEPTH TRAINING FOR ITS PROFESSIONAL

TEAM OF INSTRUCTORS IN EFFECTIVELY TEACHING SCIENCE, CURRICULUM

DEVELOPMENT AND CLASSROOM MANAGEMENT. AT LEAST 40% OF THE INSTITUTE'S

PART-TIME AND SUMMER CAMP INSTRUCTORS GO ON TO BECOME PUBLIC AND

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

PRIVATE SCHOOL TEACHERS, CREATING A TREMENDOUS RIPPLE EFFECT IN IMPROVING THE QUALITY OF SCIENCE EDUCATION IN SCHOOLS.

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

PUBLIC EVENTS

EACH YEAR YOUTH SCIENCE INSTITUTE HOLDS AN INSECT FAIR IN MAY AT SANBORN PARK AND A WILDLIFE FESTIVAL IN OCTOBER AT ALUM ROCK PARK. EACH EVENT IS FREE, OPEN TO THE PUBLIC, AND GEARED FOR FAMILIES. THE EVENTS FEATURE LIVE ANIMALS, HANDS-ON LEARNING, AND CRAFTS. MORE THAN 3,000 CHILDREN AND ADULTS ATTEND THESE EVENTS EACH YEAR.

EXPENSES \$ 3210. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3269.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION'S BY-LAWS WERE OUT OF DATE GIVEN CURRENT BEST PRACTICES FOR NON-PROFIT ORGANIZATIONS. THE REVISION WAS NECESSARY TO REFLECT CURRENT GOVERNANCE STANDARDS. THE PRIMARY CHANGES TO THE BYLAWS OF THE ORGANIZATION WERE TO CHANGE THE FISCAL YEAR TO OCTOBER 1-SEPTEMBER 30 AND TO CHANGE THE NUMBER OF DIRECTORS FROM 27 TO 10-25.

FORM 990, PART VI, SECTION A, LINE 10: THE FINANCE COMMITTEE REVIEWED THE FORM 990 PRIOR TO FILING WITH THE IRS. THE FINANCE COMMITTEE INCLUDED THE PRESIDENT, TREASURER, AND SEVERAL MEMBERS OF THE BOARD. EACH COMMITTEE MEMBER REVIEWED THE FORM 990 IN DETAIL, FOLLOWED BY A COMMITTEE MEETING TO DISCUSS THE FORM 990. THE FINANCE COMMITTEE THEN PRESENTED THE FORM 990 TO THE ENTIRE BOARD FOR APPROVAL. A PAPER OR ELECTRONIC COPY OF THE FINAL AND

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

APPROVED FORM 990 WAS PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING WITH THE IRS

FORM 990, PART VI, SECTION B, LINE 12C: PURSUANT TO THE CONFLICTS OF INTEREST POLICY, AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE, AIMED AT DETERMINING ANY FAMILY AND BUSINESS RELATIONSHIPS AND TRANSACTIONS OR OTHER TRANSACTIONS THAT MAY POSE A POTENTIAL CONFLICT, IS DISTRIBUTED TO ALL COVERED PERSONS (I.E., BOARD MEMBERS, OFFICERS AND EXECUTIVE LEADERSHIP OR KEY EMPLOYEES). COVERED PERSONS ARE REQUIRED TO DISCLOSE REAL OR POTENTIAL CONFLICTS AT THE TIME WHEN SUCH CONFLICTS ARISE. WHEN SOMEONE BECOMES A COVERED PERSON AND ANNUALLY THEREAFTER, EACH COVERED PERSON IS REQUIRED TO SIGN A STATEMENT AFFIRMING THAT HE/SHE: (1) HAS RECEIVED A COPY OF THE CONFLICTS OR INTEREST POLICY; (2) HAS READ THE POLICY AND UNDERSTANDS SAID POLICY; AND (3) AGREES TO COMPLY WITH ALL REQUIREMENTS OF THE POLICY, INCLUDING COMPLETING THE CONFLICTS OF INTEREST QUESTIONNAIRE. THE PROCEDURES FOR ADDRESSING ANY CONFLICT OF INTEREST INCLUDES, BUT IS NOT LIMITED TO, THE FOLLOWING: (1) THE CONFLICTING INTEREST IS FULLY DISCLOSED TO THE BOARD; (2) THE INTERESTED PERSON RESPONDS TO FACTUAL QUESTIONS RELATED TO THE SUBSTANCE OF THE TRANSACTION OR ARRANGEMENT BEING CONSIDERED, AFTER WHICH HE/SHE SHALL LEAVE THE MEETING; (3) THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTION; (4) ALTERNATIVES TO THE PROPOSED TRANSACTION ARE INVESTIGATED, COMPETITIVE BIDS OR COMPARABLE VALUATIONS ARE OBTAINED; AND (5) THE TRANSACTION OR ACTION MUST BE APPROVED BY A MAJORITY OF DISINTERESTED PERSONS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization YOUTH SCIENCE INSTITUTE	Employer identification number 94-1265213
--	---

FORM 990, PART VI, SECTION B, LINE 15: DURING THE FISCAL YEAR, THE BOARD APPOINTED A COMPENSATION COMMITTEE, COMPRISED SOLELY OF INDEPENDENT DIRECTORS, NONE OF WHICH HAD A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT, TO BE ACCOUNTABLE FOR REVIEWING THE COMPENSATION PACKAGES FOR THE EXECUTIVE DIRECTOR (AS THE TOP MANAGEMENT OFFICIAL) AND THE CO-FINANCE DIRECTORS WHO SHARE THE RESPONSIBILITIES OF THE TOP FINANCE OFFICIAL. APPROPRIATE COMPARABILITY DATA WAS OBTAINED FROM INDEPENDENT SOURCES, I.E., TOTAL ECONOMIC BENEFITS PAID BY SIMILARLY SITUATED ORGANIZATIONS FOR SIMILAR JOB RESPONSIBILITIES. THE COMPARABLE DATA WAS BASED ON SEVERAL PARAMETERS: GEOGRAPHIC LOCATION, THE NUMBER OF EMPLOYEES, FIELD OF SERVICE, AND ANNUAL BUDGET. THE COMMITTEE'S WRITTEN RECORDS INCLUDE A LIST OF MEMBERS PRESENT DURING THE DISCUSSION AND DECISION MAKING PROCESS AND INCLUDED A DESCRIPTION OF THE COMPARABLE DATA RELIED ON BY THE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19: WHILE FEDERAL TAX LAWS DO NOT MANDATE THAT THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS BE MADE AVAILABLE FOR PUBLIC INSPECTION, THE ORGANIZATION MAKES IT FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
COLUMN (D)
DURING THE YEAR ENDED SEPTEMBER 30, 2009 THE INSTITUTE ENTERED INTO A CONTRACT WITH TIKTALA, INC. TO PROVIDE WEBSITE REDESIGN IN THE AMOUNT OF \$30,000. TIKTALA, INC. ALSO PROVIDED IN-KIND CONTRIBUTIONS IN THE AMOUNT OF \$10,000. AS A BOARD MEMBER OF YSI AND ALSO THE PRINCIPAL OF

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

YOUTH SCIENCE INSTITUTE

Employer identification number

94-1265213

TIKTALA, MS. PADHY RECUSED HERSELF FROM THE BOARD'S DELIBERATIONS AND
DECISION PROCESS REGARDING THE SELECTION OF A VENDOR FOR THESE
SERVICES.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
53	THRIFT SHOP BUILDING	062504	SL	30.00	16	414,661.			414,661.	58,744.		13,822.
	* 990 PAGE 10 TOTAL BUILDINGS					414,661.		0.	414,661.	58,744.	0.	13,822.
	FURNITURE & FIXTURES											
34	VERTEBRATE CABINET	113082	SL	10.00	16	705.			705.	705.		0.
39	BIRD CASES	070187	SL	10.00	16	2,104.			2,104.	2,104.		0.
47	ALUM ROCK FIREPLACE INSERT	100999	SL	10.00	16	2,545.			2,545.	2,545.		0.
48	VASONA EXHIBITS (LESS GYROSCOPE)	063004	SL	10.00	16	201,144.			201,144.	96,243.		20,114.
49	EXCEED GRANT MODULE	102605	SL	5.00	16	861.			861.	287.		574.
62	DONOR WALL	092908	SL	30.00	16	15,663.			15,663.			268.
66	DONOR WALL - DESIGN	100808	SL	30.00	16	8,734.			8,734.			291.
67	FURNACE	011409	SL	10.00	16	2,291.			2,291.			229.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES					234,047.		0.	234,047.	101,884.	0.	21,476.
	MACHINERY & EQUIPMENT											
1	(D)MICROSCOPE	040186	SL	5.00	16	500.			500.	500.		0.
6	(D)XEROX 5018 COPIER	052590	SL	5.00	16	4,933.			4,933.	4,933.		0.
7	(D)HOOVER PORTAPOWERS706	030593	SL	5.00	16	116.			116.	116.		0.
8	HOOVER CONQUEST/DUST CUP	030593	SL	5.00	16	391.			391.	391.		0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
11	HP LASERJET 4P	081894	SL	5.00	16	1,274.			1,274.	1,274.		0.
13	AT&T TELEPHONE SYSTEM	032295	SL	10.00	16	3,442.			3,442.	3,442.		0.
15	VASONA HVAC	090196	SL	10.00	16	2,177.			2,177.	2,177.		0.
16	THRIFT SHOP HVAC	010197	SL	10.00	16	17,177.			17,177.	17,177.		0.
28	2 TELESCOPES SEACOAST	063004	SL	10.00	16	5,331.			5,331.	2,798.		533.
29	SCOPE ON A ROPE	072101	SL	5.00	16	2,155.			2,155.	2,155.		0.
30	TELEPHONE SYSTEM	063004	SL	5.00	16	1,280.			1,280.	1,216.		64.
31	DELL SERVER	063005	SL	5.00	16	1,122.			1,122.	952.		170.
32	(D)QUICKBOOKS SOFTWARE	103105	SL	3.00	16	1,448.			1,448.	1,448.		0.
33	LAPTOP - SUSANNE	121405	SL	3.00	16	1,073.			1,073.	1,073.		0.
55	2 CASH REGISTER MACHINES	082407	SL	5.00	16	1,435.			1,435.	478.		478.
56	ALARM SYSTEM	113006	SL	5.00	16	8,960.			8,960.	3,584.		1,792.
65	DVR OR THRIFT STORE SECURITY	093009	SL	3.00	16	1,518.			1,518.			506.
69	WESITE DEVELOPMENT	052809	SL	5.00	16	22,000.			22,000.			4,400.
70	WESITE DEVELOPMENT	121708	SL	5.00	16	7,330.			7,330.			1,466.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT					83,662.		0.	83,662.	43,714.	0.	9,409.
	LAND											
54	LAND - THRIFT SHOP	062504	SL	.000	16	500,000.			500,000.			0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL LAND					500,000.		0.	500,000.	0.	0.	0.
	OTHER											
41	INSECT SPECIMENS/CASES	120186		.000	16	580.			580.			0.
50	ALUM ROCK RENOVATION	040196	SL	10.00	16	103,982.			103,982.	103,982.		0.
51	ALUM ROCK AVIARIES	123102	SL	10.00	16	104,773.			104,773.	61,117.		10,477.
52	VASONA ADDITION	063006	SL	30.00	16	1235161.			1235161.	89,206.		41,172.
57	DOOR FOR VASONA BLDG	093006	SL	10.00	16	7,836.			7,836.	837.		784.
	VASONA ADDITION -											
58	BLACH CONSTRUCTION	100107	SL	30.00	16	39,824.			39,824.			1,327.
	VASONA LEARNING CENTER											
59	LOFT	043008	SL	30.00	16	11,640.			11,640.			388.
60	THRIFT STORE FACADE	090808	SL	30.00	16	36,415.			36,415.	101.		1,214.
61	BEAUTY SHOP FACADE	093008	SL	30.00	16	22,682.			22,682.			756.
63	DONOR BRICKS	092808	SL	30.00	16	8,027.			8,027.			522.
64	ROOF & UPPER DOOR	093009	SL	10.00	16	33,828.			33,828.			3,383.
68	WINDOW	101508	SL	30.00	16	1,240.			1,240.			42.
	* 990 PAGE 10 TOTAL OTHER					1605988.		0.	1605988.	255,243.	0.	60,065.
	* GRAND TOTAL 990 PAGE 10 DEPR					2838358.		0.	2838358.	459,585.	0.	104,772.