

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Check if applicable

Address change

Name change

Initial return

Termination

Amended return

Application pending

Website: ▶

Governance

Tax-exempt status

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 ► The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2008 calendar year, or tax year beginning September 1 2008, and ending 20 09 Employer identification number C Name of organization Commulties in Schools of Hidalgo County, Inc. Doing Business As Communities in Schools of Hidalgo County, Inc. 2540616 label or Telephone number print or Number and street (or P O box if mail is not delivered to street address) 630-0016 956) 3700 N Tenth Street 270 Specific City or town, state or country, and ZIP + 4 Instructions. McAllen, TX 78501 G Gross receipts \$ 1,358,179 F Name and address of principal officer David "Gus" Kennedy ☑ No H(a) Is this a group return for affiliates? Yes 3700 N. Tenth # 270; McAllen, TX 78501 H(b) Are all affiliates included? ☐Yes ☐ No √ 501(c) (3)
✓ (insert no.) If "No," attach a list (see instructions) H(c) Group exemption number Type of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 1994 M State of legal domicile TX Summary Briefly describe the organization's mission or most significant activities. To work with students, their families, and educational and social institutions in drop-out prevention. Students at risk of dropping out of shool are 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. Number of voting members of the governing body (Part VI, line 1a). . Number of independent voting members of the governing body (Part VI, line 1b)

>	5 Total number of employees (Part V, line 2a)		43
Activi	6 Total number of volunteers (estimate if necessary)	6	40
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	-0-
	b Net unrelated business taxable income from Form 990-T, line 34	7b	-0-
	INTERNAL REVENUE SERVICE	Prior Year	Current Year
_	8 Contributions and gran 524 Part VIII, R EG 51 V.E.D	1,319,259	787,105
nge	9 Program service revenue (Part VIII, line 2g)		559,250
Revenue	10 Investment income (Part VIII, colly) (A) lines (PI)4, and 7d)	17,099	11,653
œ	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		171
	12 Total revenue add lines 8 through 11 (must equal Part VIII) column (A) line 12 \	1,336,358	1,358,179
	13 Grants and similar amounts paid (Part IX column (A), lines 1–3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,059,201	1,007,143
nec	16a Professional fundraising fees (Part IX, column (A), line 11e)		
찚	b Total fundraising expenses (Part IX, column (D), line 25) ▶	ere es la estada el e	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	185,664	204,465
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).	1,244,865	1.211,608
	19 Revenue less expenses. Subtract line 18 from line 12	91,493	146,571
e o	POSTMARK RECEIV	Beginning of Year	End of Year
t Assets or id Balances	20 Total assets (Part X, line 16)	719,993	902,211
AB	21 Total liabilities (Part X, line 26)	4,388	40,035
₹ E	22 Net assets or fund balances. Subtract line 21 from line 20. 10. 1 10. 22	715,605	862,176

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 helpful the true correct, and complete Declaration of preparer (other than both lives best of on all information of which preparer has any knowledge parer (other trial subsection all information of which preparer has any knowledge

Sign Here

Type or print name and title

Date DIPECTOR

Preparer's signature Paid Preparer's

Use Only

Rhonda L.

Check if selfemployed 🕨 🔽 Preparer's identifying number (see instructions)

P00961520 1510398 ▶ 75 Phone no ► (956) 631-4446

May the IRS discuss this return with the preparer shown above? (see instructions) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Gillum, CPA

929 E. Esperanza #14; McAllen, TX 78501

Cat No 11282Y

FIN

✓ Yes
☐ No. Form 990 (2008)

Par	t III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: To work with students that are at risk of dropping out of school together with their families, school and comunity organizations to enhance their chances of completing high school.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$ 890,658 including grants of \$ -0-) (Revenue \$ 559,250)
	At risk students in six local school districts received services. The total number of students receiving services was 2,335.
	······································
4b	(Code.) (Expenses \$ including grants of \$) (Revenue \$)
	•••••••••••••••••••••••••••••••••••••••
	······································
4C	(Code:) (Expenses \$ncluding grants of \$) (Revenue \$)
	······································

4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses \$ 890.658 (Must equal Part IX. Line 25, column (B).)

Pai	rt 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?.	2		✓
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	4		√
5	Schedule C, Part II	5		√
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? If "Yes," complete Schedule D, Part I	6		→
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_		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
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		✓
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	✓	
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? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a		✓
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.? If "Yes," complete Schedule F, Part I	14b	_	✓
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, Part II	15		✓
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, Part III	16		√
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		√
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 21		*
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	22		1
22 23	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete	23		▼
24a	Schedule J			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓_
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
đ	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		✓
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
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		1
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? If "Yes," complete Schedule L, Part III	27		1

Pa	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:		_ !	
а	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)? If "Yes," complete Schedule L, Part IV	28a		✓
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		1
С	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? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	<u> </u>
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>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
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		1
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		/

Form **990** (2008)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Үөз	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 45		,	
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	√	-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	_N/	A
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		1
ь	If "Yes," enter the name of the foreign country: ► N/A			
•	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		√
		5b		√
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	N/	A
6a	Did the organization solicit any contributions that were not tax deductible?	6a		√
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	N/	A
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?	[.]		. 🗸
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_N/	A
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
q	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	1
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	NT /	√
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	Α
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	N/	A
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.		_]	
а	Did the organization make any taxable distributions under section 4966?	9a	N/	A
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/	A
	Section 501(c)(7) organizations. Enter.			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities N/A			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		. N. /	
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b N/A	12a	N/	A

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

Sec	tion A. Governing Body and Management			
			Yes	No
	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.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
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		✓
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		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓_
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		√
6	Does the organization have members or stockholders?	_6_		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a_		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a_	\	
b		8b	_N./	_A_
9a		_9a		✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,		37 /	,
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b_	N/	A
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	10	1	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		
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	11	1	
Soc	tion B. Policies	- ' '	Υ	·
000	don b. Folloics		Yes	No
122	Done the expenization have a worten conflict of interest policy? If "No " go to line 12	12a	1	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	124		
D	rise to conflicts?	12b		1
				<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		✓
13	Does the organization have a written whistleblower policy?	13	√	
14	Does the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		, .	-
а	The organization's CEO, Executive Director, or top management official?	15a	. ✓	
b	Other officers or key employees of the organization?	15b	✓	<u> </u>
	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		-	١,
	with a taxable entity during the year?	<u>16a</u>		✓
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	N/	<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶None		•	
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 int	erest	
	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 recoorganization Miguel Garcia; 3700 N. Tenth Street # 270; McAllen, TX 78501	rds o	f the	
	Accompanies - Midual Garcia: 3700 N. Lenth Street # 270: McAllen LX 78501			

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 co		any o	offic			ctor,	trus			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee	Institutional trustee	` 		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Laura Trevino Vice President		1		1				-0-	-0-	-0-
DeAnne Economedes Secretary		1		1				-0-	-0-	-0-
Silvia Garcia Treasurer		1		1				-0-	-0-	-0-
Olga Salinas-Maldonado President		1		1				-0-	-0-	-0-
Ramiro Nino Board Member		1						-0-	-0-	-0-
Mari Gonzalez Board Member		1						-0-	-0-	-0-
Tony Gray Board Member		1						-0-	-0-	-0-
David "Gus" Kenney Executive Director					✓	1		113,180	-0-	-0-
Miguel Garcia, CPA Accountant					1			74,000	-0-	-0-
Valerie Rivera Program Director				_	1			37.425	-0-	-0-
										<u> </u>
				_						
										

Pai	t VII Section A. Officers, Directors, Tru	stees, Key	/ Emp	loy	ees	an	d Hig	hes	t Compensate	d Employees (co	ontinued)
	(A)	(B)			(6	C)			(D)	(E)	(F)
	Name and title	Average hours per week	Individual Irustee	hstitutional trustee	Officer	al Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
							l				
								_			
								L			
		_									
							<u> </u>				
<u>1b</u>	Total		• •		•		<u>.</u>	<u> </u>	224,605	-0-	-0-
2	Total number of individuals (including those organization ► 1	ein 1a) wh	o rec	eive	ed n	nore	thar	1 \$1	00,000 in repo	rtable compens	ation from the
											Yes No
3	Did the organization list any former office employee on line 1a? <i>If "Yes," complete State of the state of </i>							oyee	e, or highest c	ompensated 	3 🗸
4	For any individual listed on line 1a, is the sthe organization and related organizations individual	greater tha	ın \$15	50,0	00?	If "	Yes, "	cor	mplete Schedu	le J for such	4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	comp	ens	satio	on f	rom a	any	unrelated org		5 1
Sec	tion B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization.	mpensate	d inde	epe	nde	nt c	ontra	cto	rs that received	d more than \$1	00,000 of
	(A) Name and business add	ress							(B) Description of s	ervices	(C) Compensation
N/A											
								_			
2	Total number of independent contractors compensation from the organization ▶ -	(including t	those	ın '	1) w	ho	recei	ved	more than \$10	00,000 in	

Dog .			MOD:::					$\overline{}$					T	
Pari	VIII	Statement of Re	venue			Tota	(A) al revenu	I B	(B) Related exem function reven	d or pt on	Uni	(C) elated siness venue	excluded under	D) enue d from tax sections 3, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contr All other contributions, gifts, and similar amounts not inclu Noncash contributions include Total. Add lines 1a-1f	grants, ided above		787,105		787,	105	7	-	-	-	-	
Program Service Revenue	2a b c	School service contra			Business Code 611710		559,2	250	5	59,250		-		
Progran	e f g		ce revenu	• •	•		559,	250		.f ~				
	3 4 5	Investment income (incother similar amounts) Income from investment of Royalties		 npt bon	•		11,0	653		÷				11,653
	ь	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (lo					3 ·	-				- - - -		-
		Gross amount from sales of assets other than inventory Less cost or other basis	(i) Securi	ties	(ii) Other			1 11					-	-
		and sales expenses . Gain or (loss) Net gain or (loss)			>								-	
ar Revenue		events (not including \$ of contributions reported See Part IV, line 18					2 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	- -	1 - Tay					
Other R		Less: direct expenses Net income or (loss) from	 om fundra	. b using e	events ►				·····			 		
	b	Gross income from gam See Part IV, line 19 Less: direct expenses. Net income or (loss) from		. a . b	ities ▶			-	- - -			-		-
	b	Gross sales of inverteums and allowances Less: cost of goods so Net income or (loss) from	ld n sales of	. a . b										
	11a b				Business Code 900099			171				-		171
	d	All other revenue Total. Add lines 11a-1 Total Revenue. Add lines	All other revenue					171						
	L	9c, 10c, and 11e	<u> </u>	<u> </u>	<u> ▶</u>	<u></u>	1,358,	1/9			L			11,653

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501 All other organizations must complete colu				(C), and (D).
	o not include amounts reported on lines 6b, b, 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	224,605	37,425	187,180	
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	616,145	616,145		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	5,885	5,885		
9	Other employee benefits	84,518	79,142	5,376	
10	Payroll taxes	75,990	62,465	13,525	
11	Fees for services (non-employees).				
		3,024		3,024	
þ	Legal	12,400		12,400	
	Accounting Lobbying				
	Professional fundraising services. See Part IV, line 17			- ::-	
	Investment management fees				
	Other	44,722	33,404	11,318	
12	Advertising and promotion	5,681		5,681	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	23,128		23,128	
17	Travel	7,850	3,405	4,445	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,299	1,235	1,064	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	4,130		4,130	
23	Insurance	11,161	2,400	8,761	
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.)	-			,
_	Public relations	19,035		10.025	<u> </u>
a b	Enrichment	23,836	23,836	19,035	
C	Summer programs	2,849	2,849		
d	Employee events	6,368	6,368	-	
e	Other	3,544	2,010	1,534	
f	All other expenses	34,438	14,089	20,349	
25	Total functional expenses. Add lines 1 through 24f	1,211,608	890,658	320,950	
26	Joint Costs. Check here ► ☑ 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				

1	Pa	rt X	Balance Sheet					
2 Savings and temporary cash investments				(A) Beginning of year		End (B) of year	
2 Savings and temporary cash investments 3 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 6 Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L 6 6 Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L 7 7 Notes and loans receivable, net 7 7 Notes and loans receivable, net 7 7 Notes and loans receivable, net 7 8 Notes and loans receivable, net 7 8 Notes and loans receivable, net 7 9 Prepard expenses and deferred charges 10a 82,259 10a Land, buildings, and equipment: cost besis 10b 82,259 11 Investments—publicly traded securities 11a 82,259 12 Investments—bublicly traded securities 11a 11a 11a 11a 11a 11a 11a 11a 11a 11		4	Cashnon-interest-bearing	19,520	1		31	1,414
3 Piedges and grants receivable, net 3 75,474 4 776,455				616,105	2		777	7,407
A Accounts receivable, net 75,474 4 76,455		_			3_			
S Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L S		_	,	75 474	4		76	5,465
8 Receivables from other disqualified persons (as defined under section 4958(f(1)) and persons described in section 4958(s)(3)(8). Complete Part II of Schedule L. 7 7 7 8 8 10 10 10 10 10 10 10 10 10 10 10 10 10		1	Receivables from current and former officers, directors, trustees, key		5_			
7 Notes and loans receivable, net		6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		6			
Rolles and loans recurrency Security	s	_						
9 Prepaid expresses and deterred charges 10a 82,259 10a Land, buildings, and equipment cost basis 10a 82,259 10b Less, accumulated depreciation, Complete Part VI of Schedule D 11 Investments—publicly traded securities 10b 69,680 5,933 10c 12,579 11 Investments—publicly traded securities 11 12 12 Investments—publicly traded securities 11 12 13 Intangible assets 13 14 Intangible assets 14 14 Intangible assets 15 16 15 16 Total assets. See Part IV, line 11 15 17 Accounts payable and accrued expenses 4,388 17 40,035 18 Grants payable 18 18 19 Deferred revenue 19 19 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, inchest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 22 Payables to current and former officers, directors, trustees, key employees, can disqualified persons. Complete Part X of Schedule D 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable 24 25 Ofter liabilities. Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 4,388 26 40,035 27 Unrestricted net assets 28 29 Permanently restricted net assets 29 30 Capital stock or trust principal, or current funds 31 31 Pad-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 31 31 Pad-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 31 31 Total interpretation of its financial	set	1						
b Less. accumulated depreciation. Complete Part V of Schedule D 10b 69,680 5,933 10c 12,579 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	As	_		2.961				1.346
b Less, accumulated depreciation. Complete Part VI of Schedule D Part VI of Schedule D 11 Investments—publicly traded securities. See Part IV, line 11 12 Investments—publicly traded securities. See Part IV, line 11 13 Interstments—publicly traded securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensed employees, and disqualified persons. Complete Part II of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Complete Part X of Schedule D 27 Unretructed net assets 28 Temporanly restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total inet assets or fund balances 31 Total inet assets or fund balances 32 Total inet assets or fund balances 33 Total inet assets or fund balances 34 Total inet assets or fund balances 35 Total inet assets or fund balances 36 Total liabilities and onet asset		ľ	Land buildings and equipment; cost basis 10a 82,259			-		-1
Part VI of Schedule D			l 1					
11 Investments—publicly traded securities 11 12 12 12 12 12 13 13		ט	Part VI of Schedule D 69,680	5,933	10c		12	2,579
12 Investments—other secunties. See Part IV, line 11 13 13 13 14 14 15 15 15 15 15 15		11			11			
13 Investments—program-related. See Part IV, line 11 14 Intangble assets 14 Intangble assets 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 719,93 16 902,211 17 Accounts payable and accrued expenses 4,388 17 40,035 18 Grants payable 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow account liabilities 20 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 23 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable 24 25 25 26 Total liabilities. Complete Part X of Schedule D 25 26 27 28 29 29 29 29 29 29 29			· · · · · · · · · · · · · · · · · · ·		12			
14					13			
15			· •		14			
16 Total assets. Add lines 1 through 15 (must equal line 34) 719,993 16 902,211 17 Accounts payable and accrued expenses 4,388 17 40,035 18 Grants payable 18 19 19 Deferred revenue 19 19 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 23 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 4,388 26 40,035 27 Unrestricted net assets 25 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 30 Capital stock or trust principal, or current funds 31 31 Pad-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 719,993 34 902,211 Part XI Financial Statements and Reporting Vee No 1 Accounting method used to prepare the Form 990: Cash Accrual Other 20 Veer the organization's financial statements complete or reviewed by an independent accountant? 2a √ Were the organization's financial statements and selection of an independent accountant? 2a √ Were the organization's financial statements and selection of an independent accountant? 2b √ Veer the organization of its financial statements and selection of an independent accountant? 2b √ Veer the organization's financial statements and selection of an independent accountant? 2c √ Veer the organization's					15			
18 Grants payable 18 19 Deferred revenue 20 Tax-exempt bond liabilities 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 23 24 Unsecured notes and loans payable 24 25 Other liabilities. Complete Part X of Schedule D 25 Total liabilities. Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 4,388 26 40,035 4388 26 40,035 26 Total liabilities. Add lines 17 through 25 4,388 26 40,035 27 862,176 28 Temporarily restricted net assets 28 Permanently restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ □ 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ □ 30 31 Pad-in or capital surplus, or land, building, or equipment fund 31 Pad-in or capital surplus, or land, building, or equipment fund 32 32 Ratianed earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 715,605 33 862,176 34 Total liabilities and net assets/fund balances 719,993 34 902,211 34 Total liabilities and net assets/fund balances 719,993 34 902,211 34 Accounting method used to prepare the Form 990; □ Cash			Total assets. Add lines 1 through 15 (must equal line 34)	719,993	16		902	2,211
18 Grants payable 18 19 Deferred revenue 20 20 20 20 20 20 20 2		17	Accounts payable and accrued expenses	4,388	17		40	0,035
19 Deferred revenue 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 21 Escrow account liability. Complete Part IV of Schedule D 21 Escrow account liability. Complete Part IV of Schedule D 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 23 Escored II of I			· · · · · · · · · · · · · · · · · · ·		18			
20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporanly restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here payable to unrelated third parties 29 Permanently restricted net assets 20 Permanently r					19			
21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25. 26 Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. 20 Total liabilities and net assets. 20 Total liabilities. 20 Total liabilities and net assets. 20 Total liabilities. 20 Total liabilities. 20 Total liabilities. 21 Total liabilities. 22 Total liabilities. 23 Total net assets or fund balances. 24 Total liabilities. 25 Total liabilities. 26 Total liabilities. 27 Total liabilities. 28 Total liabilities. 29 Total liabilities. 20 Tota		20			20			
persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 715,605 33 862,176 719,993 34 902,211 Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements and selection of an independent accountant? 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? 2a 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?	es							
23 Secured mortgages and notes payable to unrelated third parties	Liabiliti	22	employees, highest compensated employees, and disqualified		; :			
24 Unsecured notes and loans payable 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total net assets or fund balances 35 Total liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and net assets/fund balances 39 Total liabilities and net assets/fund balances 30 Total liabilities and net assets/fund balances 30 Total liabilities and net assets/fund balances 31 Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other 20 Were the organization's financial statements compiled or reviewed by an independent accountant? 21 Were the organization's financial statements audited by an independent accountant? 22 ✓ 23 ✓ 24 ✓ 25 ✓ 26 ✓ 27 ✓ 28 ✓ 29 ─ 29 ─ 29 ─ 29 ─ 29 ─ 20 ─ 21 ─ 22 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 29 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 29 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 29 ─ 20 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 29 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 29 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 24 ─ 25 ─ 26 ─ 26 ─ 27 ─ 28 ─ 29 ─ 29 ─ 20 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 26 ─ 27 ─ 28 ─ 29 ─ 20 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 26 ─ 27 ─ 28 ─ 29 ─ 20 ─ 20 ─ 21 ─ 21 ─ 22 ─ 23 ─ 24 ─ 25 ─ 26 ─ 27 ─ 28 ─ 29 ─ 2		22						
Other liabilities. Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Timestricted net assets 27 Unrestricted net assets 28 Permanently restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 715,605 33 862,176 71			· · · · · · · · · · · · · · · · · · ·					
Total liabilities. Add lines 17 through 25								
Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets			Total liabilities. Add lines 17 through 25				40	0.035
Permanently restricted net assets. 29 Permanently restricted net assets. Crapital stock or trust principal, or current funds. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 31 Total net assets or fund balances. Total liabilities and net assets/fund balances. Total liabilities and net assets/fund balances. Total review or capital statements and Reporting. Part XI Financial Statements and Reporting. Yes No Accounting method used to prepare the Form 990: Cash Accrual Other Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? 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? 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? Total net assets or fund balances 715,605 33 862,176 719,993 34 902,211 Yes No Yes No 2a ✓ 2b ✓ 2b ✓ 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?			Organizations that follow SFAS 117, check here ▶ ☑ and			-		<u> </u>
Permanently restricted net assets. 29 Permanently restricted net assets. Crapital stock or trust principal, or current funds. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 31 Total net assets or fund balances. Total liabilities and net assets/fund balances. Total liabilities and net assets/fund balances. Total review or capital statements and Reporting. Part XI Financial Statements and Reporting. Yes No Accounting method used to prepare the Form 990: Cash Accrual Other Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? 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? 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? Total net assets or fund balances 715,605 33 862,176 719,993 34 902,211 Yes No Yes No 2a ✓ 2b ✓ 2b ✓ 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?	aŭ	27		715,605	27	_	862	2.176
Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 35 Total liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and Reporting Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: □ Cash ☑ Accrual □ Other Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? 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? 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?	Bal				28			
30 Capital stock or trust principal, or current funds	פַ		_		29			
30 Capital stock or trust principal, or current funds	or Fur		Organizations that do not follow SFAS 117, check here ▶ □			 s	•	-
Part XI Financial Statements and Reporting Yes No 1 Accounting method used to prepare the Form 990: □ Cash ☑ Accrual □ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	ts	30	- · · · · · · · · · · · · · · · · · · ·		30			
Part XI Financial Statements and Reporting Yes No 1 Accounting method used to prepare the Form 990: □ Cash ☑ Accrual □ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Se				31			
Part XI Financial Statements and Reporting Yes No 1 Accounting method used to prepare the Form 990: □ Cash ☑ Accrual □ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	As				32			
Part XI Financial Statements and Reporting Yes No 1 Accounting method used to prepare the Form 990: □ Cash ☑ Accrual □ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	det.		T-4-1	715,605			862	2,176
Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: □ Cash ☑ Accrual □ Other Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? 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? 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?	_		Total liabilities and net assets/fund balances					<u> </u>
1 Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Pa	rt XI	Financial Statements and Reporting			········		<u> </u>
2a Were the organization's financial statements compiled or reviewed by an independent accountant?							Yes	No
b Were the organization's financial statements audited by an independent accountant?			- , ,		^	20		
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? 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 3a			· · · · · · · · · · · · · · · · · · ·	•	′ .	I	-	
the audit, review, or compilation of its financial statements and selection of an independent accountant?							-	
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?	С						_	
the Single Audit Act and OMB Circular A-133?	0-						-	
	за							
						od	l ¥	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

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

20**08**

Open to Public Inspection

_		venue Service	<u> </u>	Mach to Form 980 of Ft	JIII 000-L			- Instruction	J		Inspection
		the organization							1 : :		tion number
_	_		nools of Hidalge						74 :		2540616
Pa	_			narity Status (All or						ee instru	ctions)
The	org			ndation because it is:							
1				rches, or association			nbed in s	section 1	l 70(b)(1)(.	A)(i).	
2	\Box			on 170(b)(1)(A)(ii). (At							
3		A hospital o	r a cooperative	hospital service organ	nization d	escribed	in section	on 170(b)	(1)(A)(III).	. (Aπach S	Schedule H.)
4	П			ation operated in conj ate:		with a no	spital de	scribedi	n secuor	ו)(מ)טרו ו	(A)(III). Enter the
-	$\overline{}$	•		the benefit of a colle		voreth o	upod or	oporatod	by a gov	oramonta	Lunit described in
5	Ш		tion operated for (b)(1)(A)(iv). (Co		ge or uni	versity ov	wried or c	operateu	by a gov	emmenta	ii uniii described in
6				remment or governme	antal unit	describe	d in sect	ion 170/	h)(1)(Δ)(v	1	
7			_	receives a substantia							the general nublic
′	ري			(1)(A)(vi). (Complete F		its suppe	/ (governii	TOTAL GIT	01 110111	and goneral public
8				d in section 170(b)(1)		Complete	Part II.)				
9				receives: (1) more the				m contrib	outions, m	nembersh	ip fees, and gross
		receipts from	n activities relate	ed to its exempt funct	tions — su	bject to d	certain ex	xceptions	s, and (2)	no more	than 33/3 % of its
				ent income and unre						1 511 tax) from businesses
		acquired by	the organization	after June 30, 1975.	See sec	tion 509((a)(2). (Co	omplete I	Part III.)		
10				nd operated exclusive							
11				and operated exclusiv							
				blicly supported organ							
				at describes the type						_	-
		a 🗌 Type		• •	• •	e III-Fun	-	_			Type III-Other
е	Ш			tify that the organizat							
			er than foundationsection 509(a)(2)	n managers and other	r than on	e or more	publicly	supporte	o organii	zations de	escribed in section
						4h - 100 -		. T	I. 75	T	III a su a a a a a a a a a a a a a a a a a
f			ization received , check this box	a written determinati	on from	the INS	that it is	а туре	ı, ıype ıı	, or Type	III supporting
~				the organization acce			ontributiv	on from a	nv of the		
g		following pe	_	the organization acce	pied airy	giit oi c	Ontributio	311 11 0111 6	arry Or tire	•	
		• .		r indirectly controls, e	either alo	ne or too	ether wit	th persor	ns descri	bed in (ii)	Yes No
				ning body of the supp							11g(i)
				rson described in (i) a							11g(ii)
				of a person described		(ii) above	? .				11g(iii)
<u>h</u>		Provide the	following inform	ation about the organ	ızations t	the organ	ization s	upports.			
(i)		of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	, , ,	ls the	(vii) Amount of
	Org	janization		(described on lines 1-9 above or IRC section		sted in your : document?		nization in of your		tion in collized in the	support
				(see instructions))				port?	 	S?	
					Yes	No	Yes	No	Yes	No	
								l			
									 		
						ĺ		ĺ		1	
_									 		
			 						 	 	
								1			
							-				
										_	_
			1				-	-	,		

	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(A)(VI)
$\overline{}$	tion A. Public Support				· · · · · · · · · · · · · · · · · · ·		
Ca	lendar 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")	1,108,819	1,453,700	1,268,618	1,319,259	787,105	5,937,501
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 1-3	1,108,819	1,453,700	1,268,618	1,319,259	787,105	5,937,501
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		* • •	-		=	-0-
6	shown on line 11, column (f)						5,937,501
	tion B. Total Support						
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1,108,819	1,453,700	1,268,618	1,319,259	787,105	5,937,501
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,107	9,963	15,969	17,099	11,653	60,791
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.)					171	171
11	Total support. Add lines 7 through 10 .	£	4 12	<u> </u>	<u> </u>		5,998,463
12	Gross receipts from related activities, etc	(see instructio	ns)			12	559,250
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>	d, third, fourth	-		n 501(c)(3)
<u>Sec</u>	tion C. Computation of Public Su	pport Percer	ntage				
14	Public support percentage for 2008 (line	6, column (f) dr	vided by line 11	, column (f))		14	98.98 %
15	Public support percentage from 2007 Sci	hedule A, Part I	V-A, line 26f			15	98.47 %
16a	a 33½ % support test—2008. If the organization did not check the box on line 13, and line 14 is 33½ % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	33½ % support test—2007. If the organization quality box and stop here. The organization quality						
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	acts-and-circun	nstances" test,	check this box	and stop here.	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test – 2007 more, and if the organization meets the "f organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum inces" test. The	stances" test, c organization qua	heck this box a lifies as a public	and stop here by supported or	Explain in Part ganization	IV how the

Pa	t III Support Schedule for Orga (Complete only if you checke	nizations De	escribed in S n line 9 of Pa	Section 509(a art I.)	n)(2) N/A				
Sec	tion A. Public Support			_					
	alendar 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.") 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 6 7a	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5								
b	received from disqualified persons. 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								
¢	Add lines 7a and 7b								
8	Public support (Subtract line 7c from line 6.)		-	_					
	tion B. Total Support								
Ca	ilendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total	
9 10a	Amounts from line 6 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								
e 11	Add lines 10a and 10b								
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.)	-		<u>.</u>					
14	First five years. If the Form 990 is for to organization, check this box and stop			nd, third, fourth			a sectio	n 501(c)(3	s) ► □
Sec	tion C. Computation of Public Su						<u>.</u>		_==
15	Public support percentage for 2008 (lin			ne 13. column	(f))	15			%
16_	Public support percentage from 2007 S	Schedule A, Pa	art IV-A, line 2			16			%
	tion D. Computation of Investmer	 			 	1			
17 18	(m)					17			<u>%</u> %
19a	331/3 % support tests-2008. If the orga	anızatıon did n	ot check the b	ox on line 14, a	and line 15 is i	more th	nan 33/ ₃ 9	%, and line	e
b	17 is not more than 33½%, check this b 33½% support tests—2007. If the organ line 18 is not more than 33½%, check this	zation did not	check a box or	n line 14 or line	19a, and line	16 is m	ore than 3	33⅓ %, and	d
20	Private foundation. If the organization								_

Part II, Section B, Li	ine 10Other inc	ome				
	2004	2005	2006	2007	2008	
Miscellaneous	-0-	-0-	-0-	-0-	171	
Total	-0-	-0-	-0-	-0-	171	
			•••••	••••	••••	
·					•••••	
			•••••		••••	
	•••••				••••	
						•••••
·			-	•••••		
				•••••		
·				•	•••••	
						•••••
	••••••				• • • • • • • • • • • • • • • • • • • •	•••••
	***************************************			•••••		
·····		•••••			•••••	
					• • • • • • • • • • • • • • • • • • • •	
·		***************************************	•••••	•••••		•••••
·			•••••			
				••••••		
·····	·····					•••••
			•••••••••••••••••••••••••••••••••••••••	•••••••••••••••••••••••••••••••••••••••		
	••••••			•••••		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

Nam	e of the organization	Emp	loyer identification number
Co	mmunities in Schools of Hidalgo County, Inc.	74	2540616
-p _a	Organizations Maintaining Donor Advised Funds or Other Similar Fu the organization answered "Yes" to Form 990, Part IV, line 6.	nds o	r Accounts. Complete if
	(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 funds are the organization's property, subject to the organization's exclusive legal contra	d in do ol? .	nor advised Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that granused only for charitable purposes and not for the benefit of the donor or donor advisor impermissible private benefit?	or oth	er
Da	rt II Conservation Easements. Complete if the organization answered "Yes" to		
		romi	990, Fart IV, ille 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	£ h.	-4
			stoncally important land area ified histonc structure
		or cert	med historic structure
2	Preservation of open space Complete lines 2a–2d if the organization held a qualified conservation contribution in the fo	rm of a	conservation easement
-	on the last day of the tax year	0. 0	toonocivation casement
	•		Held at the End of the Year
а	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 ten the taxable year ▶		d by the organization during
4	Number of states where property subject to conservation easement is located ▶	 .	
5	Does the organization have a written policy regarding the periodic monitoring, inspectio enforcement of the conservation easements it holds?		
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements du		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during	the y	ear▶ \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's fi	e and	expense statement, and
Da	the organization's accounting for conservation easements It III Organizations Maintaining Collections of Art, Historical Treasures, or O	thar S	imilar Assats
	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 start, historical treasures, or other similar assets held for public exhibition, education, or reservoide, in Part XIV, the text of the footnote to its financial statements that describes the	earch ir	n furtherance of public service,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statem historical treasures, or other similar assets held for public exhibition, education, or researched the following amounts relating to these items:	arch in	nd balance sheet works of art, furtherance of public service,
	(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 a following amounts required to be reported under SFAS 116 relating to these items	ssets	for financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		. > \$

Pai	t III Organizations Maintaining	Collections	of Art, H	listorica	I Treasure	s, or C	ther Similar	Assets (continued)
3	Using the organization's accession and items (check all that apply):	d other record	s, check	any of t	he following	that a	re a significant	use of its collection
а	Public exhibition		d	L L	oan or exch	nange p	rograms	
b	Scholarly research		е		Other			
c	☐ Preservation for future generation	s						
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV							
5	Dunng 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							
Pa	Trust, Escrow and Custodi Part IV, line 9, or reported a	al Arrangement on l	ents. Co Form 99	mplete i 0, Part)	f organızati (, line 21.	on ans	wered "Yes" to	o Form 990, ——————
						tions or	other assets r	Oot Yes No
Þ	If "Yes," explain the arrangement in Pa	art XIV and cor	nplete th	e followi	ng table.			Amount
						1		AITIOUTIL
C	Beginning balance					. 1c	 	
d	Additions during the year					. 1d		
е	Distributions during the year					. <u>1e</u>	 	
f	Ending balance					. 11	<u> </u>	
	Did the organization include an amount ff "Yes," explain the arrangement in Pa	art XIV.					· · · · ·	└ Yes └ No
Pa	t V Endowment Funds. Comp	lete if organi	zation a	nswered			990, Part IV, II	
		a) Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years bad	ck (e) Four years back
1a	Beginning of year balance		7				<u> </u>	_1
b	Contributions				· -			
С	Investment earnings or losses		A -			. :	-	
d	Grants or scholarships		-	-				
9	Other expenditures for facilities and programs			T. A		; ;		-
f	Administrative expenses		1 1	- E				
g	End of year balance		- 3	£ .+ .	1.1.2	7		1.
2	Provide the estimated percentage of the		lance he	ld as:				
a	Board designated or quasi-endowment							
ь	Permanent endowment ▶							
c	Term endowment ▶%							
-	Are there endowment funds not in the p	acception of th	o organi	zation the	at are hold a	nd adm	unistared for the	,
ou	organization by:	0556551011 01 11	ie Organii	Lation the	at are rield a	ind adm	mistered for the	Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations			• •				3a(ii)
ь	If "Yes" to 3a(ii), are the related organization	zations listed a	 Is require	d on Sc	hedule R?			3b
4	Describe in Part XIV the intended uses	of the organiz	ation's e	ndowme	nt funds.			
Par	t VI Investments-Land, Build					art X.	line 10.	
	Description of investment	(a) Cost or of	her basis	(b) Co	st or other s (other)		Depreciation	(d) Book value
4-	l and	- 		 				
_	Land	·						
b	Buildings	·						
Ç	Leasehold improvements	·		2/	1,464		21.885	12.579
	Equipment	· 			7,795		47.795	
	I. Add lines 1a-1e. (Column (d) should equa	J Form 000 Da	rt V colo			<u>-</u>		-0-
rota	i, nuu iiries Ta-Te, joolumin (a) snould equa	ы готті 990, Ра	LA, COIUI	nn (B), III	10(c)) .			12,579

Part VII Investments - Other Securities	Soo Form 000 Part	Y line 12	Page .
(a) Description of security or category	(b) Book value	(c) Method of val	uation
(including name of security)	(2) 336 1223	Cost or end-of-year m	narket value
Financial derivatives and other financial products			
Closely-held equity interests	<u></u>		
Other			
		 	
			·
711/01-11/11/11/11/11/11/11/11/11/11/11/11/11			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12	d Coo Form 000 Port	V line 12	
Part VIII Investments - Program Relate			
(a) Description of investment type	(b) B∞k value	(c) Method of val Cost or end-of-year m	narket value
			
			
			
			
		-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description		(b) B∞k value
			
			
			
	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) should equal Form 990, Part X, col		<u> </u>	<u> </u>
Part X Other Liabilities. See Form 990,			
(a) Description of liability	(b) Amount		. F
Federal income taxes			·
			-
		\dashv	
			-
			-
			•
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25) ▶		<u> </u>	
In Part XIV, provide the text of the footnote to the	organization's financial st	atements that reports the organiz	ation's liability for
uncertain tax positions under FIN 48.			

Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,358,179
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,211.608
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	146,571
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Pnor period adjustments	7	
8	Other (Describe in Part XIV)	8	
9		9	
10	Total adjustments (net). Add lines 4–8	10	146,571
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	e pe	r Return
1	Total revenue, gains, and other support per audited financial statements	1	1,358,179
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	_	
ь	Donated services and use of facilities	┛	
С	Recovenes of pnor year grants	_].	i
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,358,179
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	-	*
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	-	-
ь	Other (Describe in Part XIV)	7	_
c	Add lines 4a and 4b	4 c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	1,358,179
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense		er Return
1	Total expenses and losses per audited financial statements	1	1,211.608
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
-	Donated services and use of facilities		•
b	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25	-	7
d	Other (Describe in Part XIV)	<u> </u>	
e	Add lines 2a through 2d	2e	- 1
3	Subtract line 2e from line 1	3	1,211,608
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3.	
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		2
b	Other (Describe in Part XIV)		-
	Add lines 4a and 4b	40	-
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	
Par	t XIV Supplemental Information		1,277,000
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 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 IV, lines 1b
	······································		•••••
			•••••

Schedule D (Fon	m 900) 2008	74-2540616 Page 5
Part XIV	Supplemental Information (continued)	
	•••••••••••••••••••••••••••••••••••	
		•••••
••••••		
*		••••••
		•••••

SCHEDULE M (Form 990)

NonCash Contributions

2008

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Name of the organization Employer identification number Communities in Schools of Hidalgo County, Inc. 74 : 2540616 Part I Types of Property (d) (a) (b) (c) Method of determining Number of contributions Revenues reported on Check if applicable Form 990, Part VIII, line 1g revenues 1 Art-Works of art Art—Historical treasures . . 2 3 Art—Fractional interests 4 Books and publications . Clothing and household -0-Face of gift card goods 6 Cars and other vehicles 7 Boats and planes R Intellectual property 9 Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities---Miscellaneous Qualified conservation contribution (historic structures) Qualified conservation contribution (other) . . Real estate-Residential . . Real estate-Commercial . . 16 Real estate—Other 17 18 Collectibles 19 Food inventory 200 -0-Lens & frame costs 20 Drugs and medical supplies 21 22 Historical artifacts Scientific specimens . . . 23 24 Archeological artifacts . . . 25 Other ▶ (.....) 26 Other ▶ (.....) 27 Other ▶ (.....) Other ▶ (.....) 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 -0which the organization completed Form 8283, Part IV, Donee Acknowledgement 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 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a contributions? b If "Yes," describe in Part II 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.

Schedule M (M (Form 990) 2008	74-2540616 Page 2
Part II		e information required by Part I, lines 30b, nation.
Part I, Lir	Line 5–Clothing and household goods– A local merchant donated git	ft cards for needy children to use to obtain
	shoes.	
Part I, Lir	Line 20Drugs and medical supplies–A local vision center donated gi	ft certificates for needy children to use
	to get eye exams and eyeglasses.	
*		
•		
••••••		
•••••		
•••••		
•••••		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization	Employer identification number
Communities in Schools of Hidalgo County, Inc.	74 2540616
Form 990, Part VI, Sect. A, Question 11Address of Directors	
aura Trevino516 W. Expressway 83; Weslaco, TX 78596	
DeAnne Economedes2622 N. Tenth Street; McAllen, TX 78501	
Silvia Garcia–421 Kuhn; Edinburg, TX 78541	
Diga Salinas-Maldonado1919 Austin Avenue; McAllen, TX 78501	
Mari Gonzalez–LaJoya, TX 78560	
Ramiro Nino1601 N. Bicentennial; McAllen, TX 78501	
Tony Gray1217 Nyssa Avenue; McAllen, TX 78501	
	······
form 990, Part VI, Sect. C, Question 19How Documents Are Made Availab	ole
Occuments are made available on request basis only.	
Form 990, Part VI, Sect. A, Question 10Process Used to Review Form 990	
Form 990 was reviewed by the Chlef Financial Officer before being present	ed to the board of directors along with
he annual audit.	
form 990, Part VI, Sect. B, Questions 15(a & b)Salary Determination	······································
salaries are approved by the board of directors.	•••••

Form **8868**(Rev December 2004)

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 filing for an Additional (not automatic) 3-Month Extension, complete only Part II (or splete Part II unless you have already been granted an automatic 3-month extension on a	on page 2 of this form). previously filed Form 8868
-Part-I-	Automatic 3-Month Extension of Time—Only submit original (no copies ne	eded)
Form 990-	Corporations requesting an automatic 6-month extension—check this box and comp	olete Part I only ▶ □
All other co	rporations (including Form 990-C filers) must use Form 7004 to request an extension o s, REMICs, and trusts must use Form 8736 to request an extension of time to file Form	f time to file income tax returns 1065, 1066, or 1041.
returns note (not automate)	Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic ex ed below (6 months for corporate Form 990-T filers). However, you cannot file it electronatic) 3-month extension, instead you must submit the fully completed signed page 2 (the electronic filing of this form, visit www.irs.gov/efile.	nically if you want the additional
Type or	Name of Exempt Organization	Employer identification number
print	Communities in Schools of Hidalgo County, Inc.	74 : 2540616
File by the due date for filing your	Number, street, and room or suite no If a P O box, see instructions 3700 N Tenth Street, Suite 270	
retum See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions McAllen, TX 78501	
Check type	of return to be filed (file a separate application for each return):	*
Form 99		☐ Form 4720
☐ Form 99	00-BL Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 99	90-EZ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 99	00-PF	☐ Form 8870
Telephone If the org If this is is for the w	s are in the care of ► Miguel Garcia, CPA No. ► (956) 630-0016 FAX No. ► (956) 630-0019 anization does not have an office or place of business in the United States, check this for a Group Return, enter the organization's four digit Group Exemption Number (GEN hole group, check this box ► . If it is for part of the group, check this box ► .	√) If this
to file ► □	est an automatic 3-month (6-months for a Form 990-T corporation) extension of time until the exempt organization return for the organization named above. The extension is for the calendar year 20 or tax year beginning	
2 If this	tax year is for less than 12 months, check reason: Initial return Final return [☐ Change in accounting period
3a If this nonref	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta undable credits. See instructions	x, less any
b If this	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tail Include any prior year overpayment allowed as a credit	· · ·
c Balan with F instruc	ce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if require TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Systems	ed, deposit stem). See \$
	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84 instructions.	53-EO and Form 8879-EO
For Privacy	Act and Paperwork Reduction Act Notice, see instructions. Cat. No 27916D	Form 8868 (Rev 12-2004)