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# SCANNED JAN 1 1 2013

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2011

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

$\overline{\mathbf{A}}$	For the	2011 cale	endar year, or tax yea	r beginning	September 1	, 20	11, and endir	ng Augi	ıst 31	, 20 12
В	Check if	applicable	C Name of organization	Communitie	s in Schools of H	idalgo Cou	nty, Inc.		D Employ	er identification number
	Address		Doing Business As C	communities	in Schools of Hid	algo Count	y, Inc.	·		74-2540616
$\overline{\Box}$	Name ch	-	Number and street (or	PO. box if mai	I is not delivered to s	reet address)	Room/su	uite	E Telephoi	ne number
$\bar{\Box}$	Initial ret	-	3700 N. Tenth Street	t				270		956-630-0016
$\overline{\sqcap}$	Terminat		City or town, state or o	country, and ZIF	7 + 4					
Ħ.	Amende		McAllen, TX 78501						<b>G</b> Gross re	eceipts \$ 1,070,031
$\exists$		on pending		principal officer	: David "Gus"	Cennedy	-	H(a) Is this a	aroup return	for affiliates? Yes V No
_	приоди		3700 N. Tenth #270;			•				ncluded? Yes No
$\overline{}$	Tay-eye	mpt status	<b>✓</b> 501(c)(3)	501(c) (	) ◀ (insert no )	4947(a)(1)	or 527			list (see instructions)
<u>:</u>	Website			(0,1(0))	,,			H(c) Group	exemption	number ► N/A
K			Corporation Trust	Associati	on Other ▶		L Year of forma		<del></del>	of legal domicile TX
_	art I	Summ	<del></del>	(					1	
	1		escribe the organiza	tion's missic	on or most signif	icant activit	ties: To wo	ork with stude	nts. their	families, and
	'		nal and social institu							
S		caacado	nai and Social institu		- Cut provoncion			<u> </u>		
Activities & Governance										
ē		Chook th	nis box ▶ ☐ if the or	ganization d	liecontinued ite o	nerations o	or disposed	of more than	25% of	ite not secote
é	2			-		-	-		3	6
95	3		of voting members	-					4	6
ies	4		of independent votil	•						
Ξ	5		mber of individuals e					· · · · ·	5	36
Ag	6		mber of volunteers (		• •				6	19
	7a		related business rev						7a	-0-
	b	Net unre	lated business taxal	ble income t	rom Form 990-1	, line 34	<del></del>		7b	-0-
								Prior Ye		Current Year
<u>o</u>	8		tions and grants (Pa		•				841,297	642,609
Revenue	9		service revenue (Pa						496,000	419,647
ě	10		ent income (Part VIII,						9,480	7,455
ш.	11	Other rev	-296	320						
	12		enue-add lines 8 th					1	,346,481	1,070,031
	13	Grants a	nd similar amounts	paid (Part IX	i, column (A), line	es 1–3) .     .	[			
	14	Benefits	paid to or for memb	ers (Part IX,	column (A), line	4)	[			
ø,	15	Salaries,	other compensation,	employee b	enefits (Part IX, co	olumn (A), li	nes 5–10)	1	,055,495	919,916
Expenses	16a	Profession	onal fundraising fees	s (Part IX, co	lumn (A), line 11	e)	[			
pe	Ь		draising expenses (					-		
ŭ	17		penses (Part IX, coli					•	186,461	166,764
	18		penses. Add lines 13				e 25) .	1	,241,956	1,086,680
	19		less expenses. Sub	1 6	*	(3)			104,525	-16,649
= g				18 Dr	-C 2 8 2012	S		Beginning of Cu	rrent Year	End of Year
sets or	20	Total ass	sets (Part X, line 16)			loc_l	1	1	.081,662	1,060,331
Ass	21		pilities (Part X, line 20	6)	MARIAL LET	r			40,222	35,540
Net Ass Fund Bal	22		ets or fund balances.		e 21 from line 2	<u></u>	1	1	,041,440	1,024,791
_	art II		ture Block	<del> </del>					·	
				xamined this re	turn, including ascon	poanving sche	edules and state	ements, and to t	ne best of n	ny knowledge and belief, it is
tru	ie, correc	t, and comp	lete. Declaration of prepa	rer other then	officer) is based on a	information o	f which prepare	er has any knowl	edge	,
_			1/6/1/1/10	110	222					
Sig	an	Skan	nature of officer	- Jean	1			Da	te 17	20/12
	ere		DAYIN KE	nedy	e tro	201171	w 7	ector	, -,	20112
•••		Type	e or print name and title	7111049	, ,		10 DH	e car		<del></del>
_		1./	/pe preparer's name	<u>_</u>	Preparer signature	2015	, 10	ate .	T	PTIN
	aid	Dhand	la L. Gillum		Shookly	KLYIII	in 1	<b>%</b> テ/12	Check [ self-emp	<b>√</b> ] if
	epare	*r		Gillum, CPA	- 7 W- 100 C	,		·· v / / -	_ <del></del> `	75-1510398
Us	se Onl	ly Firm's r	SOCIAL D		; McAllen, TX 78	501			n's EIN ▶	956 618-2224
N 4 -	w the II		address ► 520 W. Peo is this return with the				nns)	Pho	ne no	
						o manucile		1 1 1 1	• • •	Form <b>990</b> (2011)
Fo	r Papen	work Redu	action Act Notice, see	one separat	e instructions.		Cat.	No 11282Y		rom <b>330</b> (2011)

orm 99	0 (2011		16	Page Z
arţ		Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III	<del></del>	_ <u>·</u>
1	Briefi	ly describe the organization's mission: rork with students that are at risk of dropping out of school together with their families, school and community		
		nizations to enhance their chances of completing high school.		
	0.90	3 3		
2	Did t	the organization undertake any significant program services during the year which were not listed on the		
	prior	Form 990 or 990-EZ?	☐ Yes	✓ No
	If "Ye	es," describe these new services on Schedule O.		
3	Did 1	the organization cease conducting, or make significant changes in how it conducts, any program		
	servi	ices?	☐ Yes	✓ No
		es," describe these changes on Schedule O.		
4	expe	cribe the organization's program service accomplishments for each of its three largest program services, enses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report	as meas t the an	sured by nount of
	grant	ts and allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Cod	le: ) (Expenses \$ 795,756 including grants of \$ ) (Revenue \$		)
	At ris	sk students in three local school districts and one charter school received services. The total number of student	s receiv	ing
	serv	ices was 15,305.		
4b	(Cod	de: ) (Expenses \$ including grants of \$ ) (Revenue \$)		)
	•			
		·		
4c	(Cod	de: ) (Expenses \$ including grants of \$ ) (Revenue \$		<u> </u>
-10	,000	, ( ) , , , , , , , , , , , , , , , , ,		'
		(Decembe in School to C)	<del></del> ,	
4d		er program services (Describe in Schedule O.) penses \$ including grants of \$ ) (Revenue \$ )		
4e		al program service expenses ► 795,756		
70		ni biodigii doi iido aubaiida		

Form **990** (2011)

Form 99	0 (2011), 74-2540616			Page 3
Part				
· · ·			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 (see instructions)?	2		1
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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			<b>✓</b>
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>√</b>
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>√</b>	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<b>√</b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	_	Α
		Forr	n <b>990</b>	(2011)

Part	Checklist of Required Schedules (continued)			
				No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	\
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		✓ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	<del></del>	<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
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
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	

Form 99		16		Page
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			Г
	Check is Schedule O Contains a response to any question in this rare v	•	Yes	. L.
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   10			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	N,	/ A
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			, 7
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 36			<b>Ļ</b>
b	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 (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	+-	✓
b	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	40		·
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>1</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<b>†</b>	1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	N.	A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		T	
	gifts were not tax deductible?	6b	N	LΑ
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		Ļ	
	and services provided to the payor?	7a	-	<b>_</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	N,	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			1
		7c		<b>V</b>
d e	If "Yes," indicate the number of Forms 8282 filed during the year	7e	1	<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f	+	<b>▼</b>
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N	<del>-</del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N	1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	N	/ P
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	N	/ P
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N	1 1
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N/A			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	122	N/	λ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b   N/A		<u> 1</u> 1 /	A
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	N/	Δ.
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			

the organization is licensed to issue qualified health plans

Did the organization receive any payments for indoor tanning services during the tax year? .

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

13b

N/A

N/A

14a

Part \	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	
	Check if Schedule O contains a response to any question in this Part VI			
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	committee, explain in Schedule O.			
b 2	Enter the number of voting members included in line 1a, above, who are independent .    1b 6 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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>√</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>√</b>
6 7a	Did the organization have members or stockholders?	6		<b>-</b>
	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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	Each committee with authority to act on behalf of the governing body?	8b	N/	Α
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	1	
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	N/	Α
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			:
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<b>✓</b>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<b>√</b>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		✓
13	Did the organization have a written whistleblower policy?	13	<b>✓</b>	
14	Did the organization have a written document retention and destruction policy?	14	<b>√</b>	
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>√</b>	
b	Other officers or key employees of the organization	15b	✓	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10-		
h	with a taxable entity during the year?	16a		✓
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	N/	70
Section	on 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 (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(	c)(3)s	only)
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inter	est p	olicy
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Miguel Garcia; 3700 N. Tenth #270: McAllen, TX 78501 (956) 630-0016	of the		

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

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

☐ Check this box if neither the organization no	any relate	d org	aniz	atic	n c	ompe	ensa	ited any curren	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week	box, unless person is both an officer and a director/trustee)						(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Johnny Rodriguez										
President	.5	1		1				-0-	-0-	-0-
(2) Deanne Economedes										
Vice President	.5	✓		✓				-0-	-0-	-0-
(3) Thelma Leal										
Secretary	.5	✓		✓				-0-	-0-	-0-
(4) Janie Trevino										
Treasurer	.5	<b>✓</b>		✓				-0-	-0-	-0-
(5) Olga Maldonado										
Member	.5	✓						-0-	-0-	-0-
(6) Maria Gonzalez										
Member	.5	✓						-0-	-0-	-0-
(7) David "Gus" Kennedy										
Executive Director	40.0				✓	1		112,640	-0-	-0-
(8) Miguel Garcia, CPA										
Chief Financial Officer	40.0				✓			74,640	-0-	-0-
(9) Valerie Rivera										
Program Director	40.0			ļ	✓	ļ		47,828	-0-	-0-
(10)										
(11)				-						
(12)								-		
(13)										
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average hours per week	box,	ınles	Pos leck is pe	more rson	than o	an	(D)  Reportable compensation from	(E)  Reportable compensation related		( <b>F</b> Estim amou oth	ated int of
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		comper from organi and re organiz	nsation the zation ilated
(15)													
(16)					•	i							
(17)													
(18)							·						
(19)													
(20)													
(21)					-								· · · · · · · · · · · · · · · · · · ·
(22)											<u>.</u>		
(23)													
(24)													
(25)													·
1b c d	Sub-total	VII, Sectio						<b>&gt; &gt; &gt;</b>	235,108 235,108	-	-0-		-0-
2	Total number of individuals (including but reportable compensation from the organi	not limited								ore than \$10	00,000	O of	
3	Did the organization list any <b>former</b> of employee on line 1a? If "Yes," complete to	ficer, direc						emp	oloyee, or high	est compe	nsated		Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of reparted the	oortal an \$1	ole ( 50,	com 000	per	nsatio	s, "	complete Sch			е	<b>V</b>
5	Did any person listed on line 1a receive of for services rendered to the organization	r accrue co	mper	nsat	tion	fror	m any	un	related organiz				<b>V</b>
Section	on B. Independent Contractors	·	•						•		-		
1	Complete this table for your five highest compensation from the organization. Repyear.												n's tax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensat	tion
None													·····
					_								
2	Total number of independent contractor							th	ose listed abo	ove) who			
	received more than \$100,000 of compens	sation from	the o	rgar	nizat	tion	ightharpoons		-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
nts	1a	Federated campaigns 1a			·	•	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
S, C	C	Fundraising events 1c					
la E	d	Related organizations 1d					
JS,	е	Government grants (contributions) 1e	632,559				
er iti	f	All other contributions, gifts, grants,					
혈환		and similar amounts not included above 1f	10,050				
Cont	g	Noncash contributions included in lines 1a-1f: \$		642 600			
	h	Total. Add lines 1a-1f	Business Code	642,609			
Program Service Revenue	20	School convice contracts	611710	419,000	419,000		
ě	2a b	School service contracts	711130	647	647		
8	C	Concert admission	711130	- 047		<del></del>	
Ē	d		-				<del></del>
Š	e			_		<del></del>	
grai	f	All other program service revenue .					
Po	g	Total. Add lines 2a-2f	▶	419,647			
	3	Investment income (including divid	ends, interest,		-		
		and other similar amounts)	▶	7,455			7,455
	4	Income from investment of tax-exempt be					
	5	Royalties	<u> ▶</u>				
	ĺ	**-	(ii) Personal				
	6a	Gross rents .					
	ь	Less: rental expenses					
	С	Rental income or (loss)				<del></del>	
	d 7a	Net rental income or (loss)  Gross amount from sales of (i) Securities	<b>&gt;</b>	-	. ,.		
	' a	assets other than inventory	(ii) Cario				
	ь	Less: cost or other basis					
	_	and sales expenses .					
	С	Gain or (loss)					
	d	Net gain or (loss)	▶				
							· l
evenue	8a	Gross income from fundraising					
Vel		events (not including \$					
Œ		of contributions reported on line 1c).					
Other		See Part IV, line 18 a					
ಕ		Less: direct expenses <b>b</b>				<del></del>	
		Net income or (loss) from fundraising Gross income from gaming activities.	events . >				
	9a	See Part IV, line 19 a					
	ь		_				
	c	Net income or (loss) from gaming acti					
		Gross sales of inventory, less					- 1
		returns and allowances a					
	b	Less: cost of goods sold b					
		Net income or (loss) from sales of inv					
		Miscellaneous Revenue	Business Code				
	11a	Miscellaneous	900099	320			320
	b						
	C					<del> · - · · </del>	
	d	All other revenue		200		<del></del>	
	12	<b>Total.</b> Add lines 11a–11d <b>Total revenue.</b> See instructions		320 1,070,031	419,647	-	7,775
	1.12			1,070,031	713,047		1,113

## 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).

require	ed to complete columns (B), (C), and (D).		m Alsia Dank IV		
<u> </u>	Check if Schedule O contains a respons				
	ot include amounts reported on lines 6b, 7b, o, 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 United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	235,108	47,828	187,280	
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 [	521,921	521,921		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,035	2,035		
9	Other employee benefits	103,549	95,977	7,572	-
10	Payroll taxes	57,303	42,656	14,647	
11	Fees for services (non-employees):				
а	Management				
b	Legal [	2,725		2,725	
С	Accounting	9,950		9,950	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	18,241	14,170	4,071	
12	Advertising and promotion	450		450	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	40,239	4,060	36,179	
17	Travel	2,271		2,271	·
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	11,947	9,286	2,661	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	3,637	1,025	2,612	
23	Insurance	11,067	2,400	8,667	<u></u>
24	Other expenses, Itemize expenses not covered			<u> </u>	
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	·		<del></del> .	<del></del>
а	Supplies, postage & copier	17,480	10,883	6,597	- 1/10-1-1-1
b	Maintenance	1,262		1,262	
С	Dues	2,692		2,692	<del></del>
d	Enrichment & summer programs	37,384	37,384		<del></del>
е	All other expenses	7,419	6,131	1,288	
25	Total functional expenses. Add lines 1 through 24e	1,086,680	795,756	290,924	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here     ✓ if following SOP 98-2 (ASC 958-720)				
					Form <b>990</b> (2011

**Balance Sheet** Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing . . . . . . . . . 1 9.996 985.234 2 2 Savings and temporary cash investments . . . . . . 973,273 3 3 4 81.950 4 64,064 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 6 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . 6 7 R 8 5,408 9 5,096 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 33,073 **b** Less: accumulated depreciation . . . . 10b -27,210 9,070 10c 5,863 Investments—publicly traded securities . . . . . . . . . . . . . . . 11 11 12 Investments - other securities. See Part IV, line 11 . . . . . . . . 12 Investments-program-related. See Part IV, line 11 . . . . . . . . 13 13 14 14 15 15 2,039 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 1,081,662 16 1,060,331 Accounts payable and accrued expenses . . . . . . . . . . . . 17 40,222 17 35,540 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Payables to current and former officers, directors, trustees, key 22 Liabilities employees, highest compensated employees, and disqualified persons. Secured mortgages and notes payable to unrelated third parties . . . 23 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . . 40,222 26 35,540 Organizations that follow SFAS 117, check here ▶ 📝 and complete **Net Assets or Fund Balances** lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . . . . . . . . 27 1.041.440 27 1,024,791 28 Temporarily restricted net assets . . . . . . . . . . . . . . . . . . 28 29 Permanently restricted net assets . . . . . . . . . . . . . . . 29 Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 32 33 Total net assets or fund balances . . . . . . . . . . . . . . . . . 1,041,440 33 1,024,791 Total liabilities and net assets/fund balances . . . . . . 1,081,662 34 1,060,331

Form 9	90 (2011)	74-25	4061	16 Pa	ige <b>12</b>
Par	XI Reconciliation of Net Assets	_			
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1		1,07	0,031
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,08	6,680
3	Revenue less expenses. Subtract line 2 from line 1	3		-1	6,649
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,041,44		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,02	4,791
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.	xplain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<b>√</b>
b	Were the organization's financial statements audited by an independent accountant?		2b	<b>1</b>	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of the audit, review, or compilation of its financial statements and selection of an independent according to the second selection of the second selection selection of the second selection	_	2c	1	
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	explain in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the y issued on a separate basis, consolidated basis, or both:	ear were			
3a			3a		<b>/</b>
b		lergo the	3b	N/	Ā
		•		- 000	(2011)

### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Name of the organization

Communities in Schools of Hidalgo County, Inc.

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

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

The c	organization is not	a private founda	ation because it is: (Fo	or lines 1	through 1	1, check	only one	box.)			
1			hes, or association of			ed in <b>sec</b>	tion 170	(b)(1)(A)(i	i).		
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3	B 🔲 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:										
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6 7	☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  ☐ 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 i	n section 170(b)(1)(A)	<b>)(vi).</b> (Cor	mplete Pa	art II.)					
9	receipts from support from acquired by th	activities related gross investme de organization a	receives: (1) more that d to its exempt funct ent income and unrel lifter June 30, 1975. Se	ions—su lated bus ee <b>sectio</b>	bject to d siness ta on 509(a)(	certain e xable ind <b>2).</b> (Com	xceptions come (les plete Par	s, and (2) ss sectio t III.)	no more n 511 tax	than 331/3%	of its
10 11	An organization	on organized ar one or more pub	doperated exclusively and operated exclusive plicly supported organ describes the type of	ely for th	ne benefi describe	t of, to   d in sect	perform i	the funct a)(1) or se	tions of, c ection 509	(a)(2). See <b>se</b>	
е	a ☐ Type I☐ By checking to	<b>b</b> his box, I certify ndation manage	* *	☐ Type is not co	III-Funct	ionally in lirectly o	tegrated r indirectl	y by one	d 🗆	Type III-Othe	sons
f	If the organization	ation received a	a written determination					I, Type	ll, or Type	e III supportin	g _
g		17, 2006, has t	he organization accep					ny of the			LJ
	(i) A person v	who directly or i	ndirectly controls, eith						d in (ii) an		No
	, ,		on described in (i) abo	_					• • •	11g(i)	
		-	a person described in								
h			ion about the support							11g(iii)	
	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o	organization sted in your document?	(v) Did y the organ col. (i)	rou notify nization in of your port?	organizat (i) organi	Is the tion in col zed in the S ?	(vii) Amount o support	ıf
			(000 111011 0000110)/	Yes	No	Yes	No	Yes	No		
(A)					-					<u></u>	
(B)											
(C)											-
(D)								_			
(E)	· <u></u>										
					<u>.                                    </u>			L			

Totai

74-2540616 Schedule A (Form 990 or 990-EZ) 2011 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009(d) 2010 (e) 2011 (f) Total Gifts. grants, contributions. membership fees received. (Do not include any "unusual grants.") . 1,319,259 787,105 765,581 841,297 642,609 4,355,851 levied revenues organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 1,319,259 787,105 765,581 841,297 642,609 4,355,851 Total. Add lines 1 through 3. . . . The portion of total contributions by each person (other than governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . -0-Public support. Subtract line 5 from line 4. 4,355,851 Section B. Total Support (d) 2010 (c) 2009 (e) 2011 Calendar year (or fiscal year beginning in) (a) 2007 **(b)** 2008 (f) Total 1,319,259 787,105 765,581 841,297 642,609 Amounts from line 4 . . . . . . 4,355,851 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . . . . . . . 17,099 10,700 11,653 9.480 7,455 56,387 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . . 171 31 526 Total support. Add lines 7 through 10 4,412,764 11 Gross receipts from related activities, etc. (see instructions) 419,647 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f) . . . . . 98.71 % Public support percentage from 2010 Schedule A. Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this  $\square$ 331/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. 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 b 10%-facts-and-circumstances test-2010. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 

					74-	2540616	D 2
	le A (Form 990 or 990-EZ) 2011	tions Doss	ibad in Cast	ion 500(a)(2)		<u>.                                    </u>	Page 3
Part	Support Schedule for Organiza (Complete only if you checked the					to qualify up	der Part II
	If the organization fails to qualify						der Fait II.
Cooki	on A. Public Support	under the te	sts listed bei	ow, please co	Jinpiete rait	ii. <i>j</i>	
-	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 2007	(6) 2000	(0, 2003	(4) 2010	(6) 2011	(i) Total
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise				-		<del>                                     </del>
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		ļ				
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)		i.				
Secti	on B. Total Support		J	<u>,</u>	4	·	<b>-</b>
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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				1		
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carned on						ļ
12	Other income. Do not include gain or			1			
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						724/ 20
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he			· · · ·	· · · · ·	• • • •	· · · <u> </u>
	ion C. Computation of Public Suppor			10		45	0/
15	Public support percentage for 2011 (line 8						%
16 Sooti	Public support percentage from 2010 Sci ion D. Computation of Investment In			<u> </u>	· · · · ·	16	%
	Investment income percentage for 2011 (			ov line 13 colu	mn (fl)	17	%
17 18	Investment income percentage for 2011 ( Investment income percentage from 2010)					<del></del>	%
19a	331/3% support tests—2011. If the organ						
ıJd	17 is not more than 331/3%, check this box						

b 331/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and

line 18 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Page 4

		_				***
		2007	2008	2009	2010	2011
II Secti	on B, Line 10	•••••				
Other In	come					
Mis	cellaneous	-0-	171	31	4	320
<b></b>						
				**********		
<del></del>						
				***************************************	•	
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### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047 20 **1 1** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization Communities in Schools of Hidalgo County, Inc. 74-2540616 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . Aggregate contributions to (during year) . 2 3 Aggregate grants from (during year) . . Aggregate value at end of year . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X . . . .

Part	III Organizations Maintaining	Collections of	Art, His	torical 1	reasures,	or Otl	her Similar A	ssets (c	ontinu	ıed)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of	ther reco	rds, chec	k any of th	e follow	ring that are a	significan	t use	of its
а	☐ Public exhibition				or exchang					
b	☐ Scholarly research		0	Othe	r					
C	☐ Preservation for future generations	3								_
4	Provide a description of the organizat	tion's collections	and expla	ain how t	hey further	the org	anization's exe	mpt purp	ose in	Part
	XIV.									
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tr	easures	s, or other simil	ar	_	
	assets to be sold to raise funds rather									
Part					anization a	answer	ed "Yes" to F	orm 990	, Part	IV,
	line 9, or reported an amoun				المراجع المراجع المراجع	!		_4		
1a	Is the organization an agent, trustee, included on Form 990, Part X?								es 🗌	No
b	If "Yes," explain the arrangement in Pa	art XIV and compl	ete the fo	ollowing t	able:	Γ		mount		
С	Beginning balance					1c				
ď	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amoun						·	Y	es 🗌	No
b	If "Yes," explain the arrangement in Pa									
Par	V Endowment Funds. Comple	ete if the organiz	zation ar	swered	"Yes" to F	orm 99	90, Part IV, line	e 10.		
		(a) Current year	<b>(b)</b> Pri	or year	(c) Two year	s back	(d) Three years bac	k (e) Fou	r years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and					İ				
	losses		<u> </u>							
d	Grants or scholarships									
е	Other expenditures for facilities and					:				
	programs									
f	Administrative expenses									
g	End of year balance		1	0' . 4 .		<u> </u>				
2	Provide the estimated percentage of t			e (line 1g	, column (a	)) neia a	is:			
a	Board designated or quasi-endowment Permanent endowment ▶	OZ	70							
b	Temporarily restricted endowment	% %								
С	The percentages in lines 2a, 2b, and 2		nn%							
3a	Are there endowment funds not in the			zation th	at are held	and adi	ministered for t	he		
- Ou	organization by:	o poccoccion on a			a. a.oo.a	u u			Yes	No
	(i) unrelated organizations							3a(i)	1	
	- 111 - 1 - 1							3a(ii)	1	
ь	If "Yes" to 3a(ii), are the related organi	izations listed as r	required o	on Sched	ule R? .			3b		
4	Describe in Part XIV the intended uses							1	4	-
Part										
	Description of property	(a) Cost or o (investm			or other basis other)		Accumulated preciation	(d) Bo	ok value	•
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment				26,093		20,230			5,863
е	Other				6,980		6,980			-0-
Total	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90. Part	X. columi	(B), line 10	)(c).)	•			5,863

Part VII	Investments - Other Securities	See Form 990, Part X,	line 12.	
	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)				
(B)				
(C) (D)		_		
(E)			<del> </del>	
(F)				
(G)				·-···
(H)				
(l)				
	(b) must equal Form 990, Part X, col. (B) line 12.)		L	· · · · · · · · · · · · · · · · · · ·
Part VIII	Investments—Program Related		T	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
_(1)				
(2)				
(3)			-	
(4)		•		
(5)			1	
(6) (7)				
(8)				
(9)			1 -	
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		<u> </u>	
Part IX	Other Assets. See Form 990, Pa		1	7.0
		a) Description		(b) Book value
	d interest			2,039
(2) (3)				
(4)	· · · · · · · · · · · · · · · · · · ·			
(5)		· · · · · · · · · · · · · · · · · · ·		<del></del>
(6)				
(7)				
(8)				
(9)	<u> </u>			
(10)	Town 600 Port V o	al /Dilina 15 i		
	umn (b) must equal Form 990, Part X, co Other Liabilities. See Form 990,		<u> </u>	2,039
Part X	(a) Description of liability	(b) Book value		
	l income taxes	(b) Book Value		
(2)	Timosino taxes		†	
(3)		-		
(4)			1	
(5)			1	
(6)			1	
(7)			]	
(8)			]	
(9)			_[	
(10)			4	
(11)			4	
	(b) must equal Form 990, Part X, col. (B) line 25.)	Alba Aai A ad Alba a da a	Abo annula di anti di	
	ASC 740) Footnote. In Part XIV, provide		the organization's financial stater	nents that reports the
organizatio	n's liability for uncertain tax positions u	HUEF FIN 48 (ASC 740).		

Part		nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,070,031
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,086,680
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-16,649
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-16,649
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	1	
1	Total revenue, gains, and other support per audited financial statements	1	1,070,031
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	_	
р	Donated services and use of facilities	-	
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	4 070 004
3	Subtract line 2e from line 1	3	1,070,031
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a  Other (Describe in Part XIV.)		
b		40	
С 5	Add lines <b>4a</b> and <b>4b</b>	4c	1,070,031
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	1,086,680
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1,000,000
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,086,680
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,086,680
Part	XIV Supplemental Information		
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor dditional information.		

ichedule D (For	ກູ 990) 2011	74-2540616 Page 5
art XIV	ກູ 990) 2011 Supplemental Information (continued)	
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### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No 1545-0047

Employer identification number

2010

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990.

Communities in Schools of Hidalgo County, Inc. 74-2540616 Types of Property (c) (a) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . . . . 1 2 Art-Historical treasures . . . 3 Art-Fractional interests . . . 4 Books and publications . . Clothing and household goods . . . . . . . . . -0- Face of gift card 6 Cars and other vehicles . . 7 Boats and planes . . . . . Intellectual property . . . . 8 9 Securities-Publicly traded . . 10 Securities-Closely held stock . Securities -- Partnership, LLC, 11 or trust interests . . . . . Securities - Miscellaneous . 12 13 Qualified conservation contribution - Historic structures . . . . . . . . 14 Qualified conservation contribution-Other . . . Real estate - Residential . . . 15 Real estate - Commercial . . 16 17 Real estate - Other . . . . 18 Collectibles . . . . . . Food inventory . . . . . . 19 20 Drugs and medical supplies . . 21 Taxidermy . . . . . . . 22 Historical artifacts . . . . . 23 Scientific specimens . . . . 24 Archeological artifacts . . Other► ( 25 Other ► ( 26 27 Other ► ( 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . Yes No 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 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 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

describe in Part II.

chedule M (	Form 990) (2010) 74-2540616 Page 2
Part II	<b>Supplemental Information.</b> Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
art 1, Lin	e 5Clothing and Household GoodsA local merchant donated gift cards for needy children to obtain shoes.

### SCHEDULE Q (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Communities in Schools of Hidalgo County, Inc.	74-2540616
Form 990, Part VI, Section A, Line 9Address of Directors	
Johnny Rodriguez220 S. 12th Avenue, Suite B; Edinburg, TX 78539	
Deanne Edonomedes2622 N. Tenth Street; McAllen, TX 78501	
Thelma Leal1201 W. University Drive; Edinburg, TX 78539	
Janie Trevino612 Nolana #540; McAllen, TX 78501	
Olga Maldonado2501 Maple; McAllen, TX 78501	
Maria GonzalezP.O. Box 12; La Joya, TX 78560	
Form 990, Part VI, Section B, Line 11(b)Process Used to Review Form 990	
Form 990 is reviewed by the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial officer before being presented to the board of directors along the chief financial of the chief financial officer before being presented to the board of the chief financial officer before before the chief financial officer befo	ng with the annual audit
for approval.	
Form 990, Part VI, Section B, Lines 15 (a) & (b)Salary Determination	
Salaries are approved by the board of directors.	
Form 990, Part VI, Section C, Line 19How Documents are Made Available	
Documents are made available on request basis only.	
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