### Form **990**

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

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

OMB No. 1545-0047

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

4100WEARE	For the	2008 calend	dar year, o	or tax year beginning Jun 1	, 2008,	and ending	Dec 31		, 2008	
В	Check if a	pplicable:		C Name of organization			D En	ployer ide	ntification Numb	er
	Addr	ess change	Please use IRS label	MY POSSIBILITIES			2	6-150	9133	
	Nam	e change	or print or type.	Number and street (or P.O. box if mail is not delive	vered to street ad	ldr) Room/suit	е <b>Е</b> Те	lephone nu	mber	
	Initia	I return	See specific	1301 CUSTER RD.		616	(	469)	241-9100	
	Term	nination	Instruc- tions.	City, town or country	State	ZIP code + 4			contain and a	
	Ame	nded return		PLANO	TX	75075	G Gr	oss receipts	\$ 343,9	77.
	Appl	ication pending	<b>F</b> Name a	and address of principal officer:	NESSON DE LA CONTRACTOR D	H	(a) Is this a group	CHECKSON CONTRACTOR CO		Yes X N
			ROBIN LE	OGRANDE 1301 CUSTER RD. #616 PLANO	TX	( 75075 H	(b) Are all affiliates		1 1	Yes N
ı	Тах-е	xempt statu	s X 501	(c) (3 ) (insert no.) 494	7(a)(1) or	527	If 'No,' attach a	i list. (see li	nstructions)	
J	Webs	ite: ► N/	A			н	(c) Group exempti	on number	▶	
ĸ	Type of	organization:	X Corpora	ation Trust Association Other	LY	ear of Formation	n: 2008	M State o	f legal domicile:	TX
Pa	ırt I	Summa	ary							
	<b>1</b> B	riefly descril	oe the org	anization's mission or most significant ac	tivities: PR	ROVIDE A	CENTER O	F CON	TINUED L	EARNIN
ø				AND PRE-VOCATIONAL TR						
Governance				ENHANCE QUALITY OF I						
ern	_			SPECIAL_NEEDS						<u>AREAS</u>
301	2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its assets 3 Number of voting members of the governing body (Part VI, line 1a)									
0ర				bers of the governing body (Part VI, line I t voting members of the governing body (F					3	
Activities				yees (Part V, line 2a)					5	
ŧί				eers (estimate if necessary)					20	
Ac	l			usiness revenue from Part VIII, line 12, co						0
	bΝ	et unrelated	business	taxable income from Form 990-T, line 34				7l	)	
							Prior Y	ear	Currei	nt Year
d)	<b>8</b> C	ontributions	and gran	ts (Part VIII, line 1h)					2	32,888
Revenue	9 P	rogram serv	ice reven	ue (Part VIII, line 2g)					1	09,099
eve				rt VIII, column (A), lines 3, 4, and 7d) $\dots$						12
<u>ar</u>				II, column (A), lines 5, 6d, 8c, 9c, 10c, an						1,978
			•	nes 8 through 11 (must equal Part VIII, col					3	<u>43,977</u>
	ŀ			ounts paid (Part IX, column (A), lines 1-3)						2,411
		•		members (Part IX, column (A), line 4)						
S)	l		•	sation, employee benefits (Part IX, colum		•			1	23,859
Expenses	<b>16a</b> P	rofessional f	fundraisin	g fees (Part IX, column (A), line 11e)						
ă	b⊤	otal fundrais	ing exper	nses (Part IX, column (D), line 25) ▶		3,913.				
ш	<b>17</b> O	ther expens	es (Part I	X, column (A), lines 11a-11d, 11f-24f)						71,236
	18 T	otal expense	es. Add lir	nes 13-17 (must equal Part IX, column (A)	, line 25)				1	97,506
	<b>19</b> R	evenue less	expenses	s. Subtract line 18 from line 12					1	46,471
Ces							Beginning	of Year	End o	f Year
seets	20 T	otal assets (	Part X, lir	ne 16)					1	47,366
Net Assets or Fund Balances	<b>21</b> T	otal liabilitie:	s (Part X,	line 26)						895
		et assets or	fund bala	nces. Subtract line 21 from line 20					1	46,471
Pa	rt II	Signatu	<u>ire Bloc</u>	:k		Halican - 11 Maril 10 and 11 and 10 a		energy von name	Name of the last o	
		Under penaltie	s of perjury,	I declare that I have examined this return, including ac. Declaration of preparer (other than officer) is based or	companying sche	edules and stater	ments, and to the h	est of my k	knowledge and be	elief, it is
		or D.	A Complete	i An I I	n an imormation	or winer prepare	1 L	1 1 <i>,</i>		
Sig	jn	1	vu	The secretarde				<u>175/C</u>	27	
He	re	Signature	of officer				Date /	,		
			1 LEOG							***************************************
		Type or pr	int name and	J UNE.			····	T	Dropovada (de. C	hina mart-
Dai	: പ		Santage Contraction of the Contr	10 01 . 4	and I	Date /	Check if self-	1 11	Preparer's identi (see instructions)	ying number
Pa Pre		Preparer's		the Hall Grown	( PArel	Sliylas	employed			
pai	rer's	signature	- Long		J'3	-1.1121				****
Us	e	Firm's name (or yours if self-		HALL GROUP, CPAs						
On		employed), address, and	▶ 100	CRESCENT COURT SUITE 700			EIN ▶			····
	one grant of the control	ZIP + 4	DAL:		TX 7520		Phone no			
May	the IRS	3 discuss thi	s return v	vith the preparer shown above? (see instru	uctions)				X Yes	No

Form	1 990 (2008) MY POSSIBILITIES	26-1509133	Page 2
Par			-
1	Briefly describe the organization's mission:		
	PROVIDE A CENTER OF CONTINUED LEARNING		
	AND PRE-VOCATIONAL TRAINING THAT WILL INCREASE THE INDEPENDENCE		
	See Form 990, Page 2, Part III, Line 1 (continued)		
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	
	Form 990 or 990-EZ?		No
	If 'Yes,' describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	vices? Yes X	No
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services	by expenses. Section 501(c)(3	3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported.	l allocations to others, the total	
	expenses, and revenue, if any, for each program service reported.		
~			
4 a	a (Code:) (Expenses \$ 184,479. including grants of \$ 2,411.)	(Revenue \$ 106,6	<u>569.</u> )
	PROVIDE POST-HIGH SCHOOL ADULTS WITH A DAY PROGRAM THAT ENCOURA	.GES	
	LIFELONG LEARNING AND INDEPENDENCE.		
41	b (Code: ) (Expenses \$ including grants of \$)	(Revenue \$	)
• •			-
		100 000 000 000 000 000 000 000 000 000	
40	c (Code:) (Expenses \$ including grants of \$)	) (Revenue \$	)
4	d Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue		
4	e Total program service expenses ▶ \$ 184,479. (Must equal Part IX, Line 25, column	(B).)	

**Checklist of Required Schedules** 

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X Schedule A ..... 2 Χ Is the organization required to complete Schedule B, Schedule of Contributors? 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 Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Χ Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III. 5 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 Χ 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Χ 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 9 X Schedule D, Part IV ..... Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V . . . . 10 Χ Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, 11 Χ VII. VIII. IX. or X as applicable ...... 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 Χ Χ Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E ..... 13 14a Χ 14a Did the organization maintain an office, employees, or agents outside of the U.S.? **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 Χ 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 Χ 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 16 Χ 17 Χ Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I . . . . 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II . . . Χ 18 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III ..... 19 Χ 19 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H ..... 20 Χ 21 Χ Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II ..... 21 22 Χ Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III ..... 22 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete 23 Χ Schedule J 24 a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25...... 24a Χ 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? ..... 24d 25 a 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 Χ b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from 25b Χ a prior year? If 'Yes,' complete Schedule L, Part I 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 Χ 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial 27 X contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III ......

Part IV **Checklist of Required Schedules** (continued) No Yes 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee: a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV 28a Χ b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete 28b Χ c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV ...... 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M........... 29 Χ Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I . . . . 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 32 Χ 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 33 Χ Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Χ Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 Χ Part V, line 2 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 36 Χ 37

Form 990 (2008)

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Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096. Annual Summary and Transmittal of U.S. 0 Information Returns. Enter -0- if not applicable ..... 1 a 0 1 b **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 Χ 1 c (gambling) winnings to prize winners? 2 a 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 2b Χ 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? ... Note. If the sum of lines 1a and 2a is greater than 250, you be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3 a Χ this return? 3b b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O . . . . 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a Χ financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ...... Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . 5 b Χ c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 5 c Prohibited Tax Shelter Transaction? Χ 6a Did the organization solicit any contributions that were not tax deductible? ..... 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b deductible? ...... 7 Organizations that may receive deductible contributions under section 170(c). 7 a Χ a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? ...... **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? ..... 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Χ Form 8282? ..... d If 'Yes,' indicate the number of Forms 8282 filed during the year ..... e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e Χ benefit contract? 7 f Χ f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ..... 7 g g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? ..... h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . 7h 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 Χ 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 9 a X a Did the organization make any taxable distributions under section 4966? **b** Did the organization make any distribution to a donor, donor advisor, or related person? ..... Χ 9h 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 ..... 10 a 10b b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ..... 11 Section 501(c)(12) organizations. Enter: 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? ...... 12a **b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year .....

BAA

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

	CUOH A.	Governing Body and Management		<del></del>	
	For each	Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, , or changes in Schedule O. See instructions.		Yes	No
1		number of voting members of the governing body			
ļ	<b>b</b> Enter the	number of voting members that are independent			
2	Did any of officer, dir	ficer, director, trustee, or key employee have a family relationship or a business relationship with any other ector, trustee or key employee?	2		<u>X</u>
3	Did the or of officers	ganization delegate control over management duties customarily performed by or under the direct supervision, directors or trustees, or key employees to a management company or other person?	3		Χ
4		ganization make any significant changes to its organizational documents	4		Χ
		orior Form 990 was filed?			
5		ganization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the	organization have members or stockholders?	6		<u>X</u>
7	a Does the	organization have members, stockholders, or other persons who may elect one or more members of the body?	7 a		X
	<b>b</b> Are any d	ecisions of the governing body subject to approval by members, stockholders, or other persons?	7 b		X
8	Did the or the follow	ganization contemporaneously document the meetings held or written actions undertaken during the year by ng:			
		ning body?	8 a	Χ	
		mittee with authority to act on behalf of the governing body?	8 b	X	
9		organization have local chapters, branches, or affiliates?	9 a		X
	and brand	bes the organization have written policies and procedures governing the activities of such chapters, affiliates, hes to ensure their operations are consistent with those of the organization?	9 b		
	describe i	by of the Form 990 provided to the organization's governing body before it was filed? All organizations must in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	
11	ls there a organizati	ny officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the on's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	11		X
<u>Se</u>	ction B.	Policies		r	
				Yes	No
12	<b>a</b> Does the	organization have a written conflict of interest policy? If 'No,' go to line 13			
			12 a	X	
	to conflict	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?	12a		
	to conflict c Does the Schedule	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?	12b	X	
	to conflict c Does the Schedule Does the	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy?	12b 12c 13	Х	
	to conflict c Does the Schedule Does the	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?	12b	X	X
14	to conflict c Does the Schedule Does the Does the Did the pr persons,	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:	12b 12c 13	X	X
14	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: iization's CEO, Executive Director, or top management official?	12b 12c 13 14	X	X
14	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:	12b 12c 13 14	X X X	X
14	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ b Other office	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: iization's CEO, Executive Director, or top management official?	12b 12c 13 14	X X X	X
14 15	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ b Other offic Describe a Did the or entity dur	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  Organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done  organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  occess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:  dization's CEO, Executive Director, or top management official?  cers of key employees of the organization?  the process in Schedule O. (see instructions)  ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?	12b 12c 13 14	X X X	X
14 15	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ b Other offic Describe a Did the or entity dur b If 'Yes,' h in joint ye	rs, directors or trustees, and key employees required to disclose annually interests that could give rise ?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done	12b 12c 13 14 15a 15b	X X X	
14 15	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ b Other offic Describe a Did the or entity dur b If 'Yes,' h in joint ve status wit	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: dization's CEO, Executive Director, or top management official? the process in Schedule O. (see instructions) ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ong the year?  as the organization adopted a written policy or procedure requiring the organization to evaluate its participation on ture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt or respect to such arrangements?	12b 12c 13 14 15a 15b	X X X	
14 15 16 Se	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ b Other offic Describe a Did the or entity dur b If 'Yes,' h in joint ve status wit ction C.	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? occess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: izization's CEO, Executive Director, or top management official? cers of key employees of the organization? the process in Schedule O. (see instructions) ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  as the organization adopted a written policy or procedure requiring the organization to evaluate its participation nurre arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt in respect to such arrangements?  Disclosures	12b 12c 13 14 15a 15b	X X X X	X
14 15 16 Se	to conflict c Does the Schedule Does the Does the Did the pr persons, a The organ b Other offit Describe to Did the or entity dur b If 'Yes,' h in joint ve status wit ction C. List the st Section 6	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: dization's CEO, Executive Director, or top management official? the process in Schedule O. (see instructions) ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ong the year?  as the organization adopted a written policy or procedure requiring the organization to evaluate its participation on ture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt or respect to such arrangements?	12b 12c 13 14 15a 15b 16a	X X X	X
14 15 16 Se 17	to conflict c Does the Schedule Does the Does the Does the Did the pr persons, a The organ b Other offic Describe a Did the or entity dur b If 'Yes,' h in joint ve status wit ction C. List the si Section 6 inspection	rs, directors or trustees, and key employees required to disclose annually interests that could give rise some sequiration regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done corganization have a written whistleblower policy? corganization have a written document retention and destruction policy? corganization have a written document retention and destruction policy? corganization have a written document retention and destruction policy? corganization data, and contemporaneous substantiation of the deliberation and decision: distantiation's CEO, Executive Director, or top management official? cores of key employees of the organization? cores in Schedule O. (see instructions) ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ong the year? corganization adopted a written policy or procedure requiring the organization to evaluate its participation nature arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt respect to such arrangements?  Disclosures  ates with which a copy of this Form 990 is required to be filed to the fil	12b 12c 13 14 15a 15b 16a	X X X	X
14 15 16 Se 17	to conflict c Does the Schedule Does the Does the Does the Does the Does the Does the Did the pr persons, a The organ b Other offic Describe a Did the or entity dur b If 'Yes,' h in joint ve status wit ction C. List the si Section 6 inspection X Own Describe	rs, directors or trustees, and key employees required to disclose annually interests that could give rise  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: inization's CEO, Executive Director, or top management official? ores of key employees of the organization? Organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable organization invest in, contribute assets to, or procedure requiring the organization to evaluate its participation nurre arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt in respect to such arrangements?  Disclosures  attes with which a copy of this Form 990 is required to be filed  104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available. Check all that apply.	12b 12c 13 14 15a 15b 16a	X X X X	X
14 15 16 Se 17	to conflict c Does the Schedule Does the Does th	rs, directors or trustees, and key employees required to disclose annually interests that could give rise s?  corganization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done corganization have a written whistleblower policy? corganization have a written document retention and destruction policy? corganization have a written document retention and destruction policy? corganization have a written document retention and destruction policy? corganization have a written document retention and destruction policy? corganization have a written document retention and destruction policy? corganization and contemporaneous substantiation of the deliberation and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: corganization's CEO, Executive Director, or top management official? corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ng the year?  corganization have a written policy?  corganization participation of the del	12b 12c 13 14 15a 16a 16b	X X X X for pu	X ublic

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) or 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 \$100,000 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	compens	ate an	y of	ficer	, di	rector,	trus	stee, or key employee		
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours		tion (		all t	hat appl		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	ardividual frustee or director	anstitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
ROBIN LEOGRANDE	40.00			Х				0.	0.	0.
CHAIRMAN	40.00	<del> </del>		Λ	_			U .	0.	
PAMELA FERRELL DIRECTOR	20.00	Х						0.	0.	0.
CHARMAINE SOLOMON DIRECTOR	20.00	Х						0.	0.	0.
ROBERT HERNANDEZ EXECUTIVE DIRECTOR	40.00			Х				30,938.	0.	0.
	-									

Page 8

Part VII   Section A. Officers, Directors, Trus		(ey	Em	ıplo	ye	es,	an		pensated Em	
(A)	(B) Average	Posi	tion (	•	<b>:)</b>	hat a	nnlv	(D)	(E)	(F)
Name and Title	hours per week			Officer		Highest compensated employee		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
	-									
	-									
	-									
	-									
	-									
									***************************************	
	-									
	-									
1 b Total							),000	30,938.	1	the
organization ▶ 0  3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in  4 For any individual listed on line 1a, is the sum of representation and related organizations greater the individual	dividual portable nan \$150  ompensa	com 0,000	pen )? If	sation 'Ye	on a s' co	ind one	other lete	r compensation from Schedule J for su	om ch services	
Section B. Independent Contractors  1 Complete this table for your five highest compensate compensation from the organization.		***********	************	****************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
(A) Name and business addres	ss							Description	) of Services	<b>(C)</b> Compensation
2 Total number of independent contractors (including to compensation from the organization ▶	those in	1) w	rho i	rece	ived	l mo	re th	nan \$100,000 in		

Par	t VI	II   Statement of Re	<u>venue</u>					/5>
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
S	1 a	Federated campaigns	1a					
N T N		Membership dues						
G GR		Fundraising events	i					
TS,		<del>-</del>						
불불		Related organizations						
S.S.	е	Government grants (contributio	ns) 1 e					
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		All other contributions, gifts, grainilar amounts not included a		232,888.				
E O	g	Noncash contribns included in	Ins 1a-1f: \$	57 <b>,</b> 257.				
8 8	h	Total. Add lines 1a-1f			232,888.			
Щ				Business Code				
E E	2 a	SERVICE FEES		611600	106,669.	106,669.	0.	0.
Ě	- u	FIFTD TRIDS		900099	930.	930.	0.	0.
E E	IJ	FIELD TRIPS		900099	1,500.	1,500.	0.	0.
<u> </u>		ADMISSION FEES		900099	1,300.	1,300.	· ·	0.
SEI	d							
ΣV	е							
GR	f	All other program service	e revenue					
28	a	Total. Add lines 2a-2f		<u> </u>	109,099.			
		Investment income (inclu						
	3	other similar amounts)	uang aividends	s, mierest and	12.	12.	0.	0.
	4	Income from investment						
	5	Royalties	(i) Real	(ii) Personal				
		-	(i) Reai	(II) Personai				
	6 a	Gross Rents						
	b	Less: rental expenses .						
	С	Rental income or (loss)						
	d	Net rental income or (los	ss)					
			(i) Securities	(ii) Other				
	/a	Gross amount from sales of assets other than inventory.						39-0
		assets other than inventory .			-		Asset St.	
	b	Less: cost or other basis						
		and sales expenses			-			
	С	Gain or (loss)			-			
	d	Net gain or (loss)		·	•			
	8a	Gross income from fund	raising events		1000			
I E	-	(not including . \$						
KEN		of contributions reported	on line 1c).					
OTHER REVENU		See Part IV, line 18		а			1.11	
뛰	h	Less: direct expenses						777 and 2
110								and the state of t
	C	Net income or (loss) from	m lunuraising e	events				
	9 a	Gross income from gam	ing activities.					
		See Part IV, line 19			-		The second second	
		Less: direct expenses			-			
	C	Net income or (loss) from	m gaming activ	⁄iti <u>es</u>	•			
	10 a	Gross sales of inventory	less returns					
	104	and allowances		a				
	b	Less: cost of goods sold	l,	b				2000 2000
		Net income or (loss) from						
		Miscellaneous Revenu		Business Code				
ì	11 -	MISCELLANEOUS 1		900099	1,978.	1,978.	0.	0.
				300033	1,3,0.	1,7,00		
	b							
	C							
	-	All other revenue						
	е	Total. Add lines 11a-11d	t		1,978.			
	12	Total Revenue. Add line	s 1h, 2a, 3, 4	5, 6d, 7d, 8c, 9c.				
	n Ace	10c, and 11e			343,977.	111,089.	0.	0.

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).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		CA,PGI, IOOU		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	2,411.	2,411.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
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		123,859.	116,428.	6,193.	1,238.
8	Pension plan contributions (include section 401 (k) and section 403(b) employer contributions)				
9	Other employee benefits				
	Payroll taxes				
	Fees for services (non-employees)				
	a Management				
	Legal		1 040	60	^
	Accounting	1,300.	1,240.	60.	0.
	d Lobbying				
	e Prof fundraising svcs. See Part IV, In 17				
	Investment management fees		1,392.	0.	333.
	g Other		1,392.	U a	333.
	Advertising and promotion		14,576.	1,003.	1,173.
13	Office expenses		14,570.	1,003.	1/1/0.
14	Information technology				
15 16	Occupancy		32,933.	686.	686.
17	Travel	4,121.	3,586.	82.	453.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		0,000		
19	Conferences, conventions, and meetings				
20	Interest		ļ		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,153.	7,093.	1,060.	0.
23	Insurance	410.	394.	8.	8.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	a DUES & SUBSCRIPTIONS	503.			10.
	b BAD DEBT EXPENSE	3,362.	3,362.		0.
	c MISCELLANEOUS	605.	581.	12.	12.
	de				
	f All other expenses				
25		197,506.	184,479.	9,114.	3,913.
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				
BAA					Form <b>990</b> (2008)

Pa	rt X	Balance Sheet			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing		1	65,234.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	13,448.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
A S	7	Notes and loans receivable, net		7	
A S E T	8	Inventories for sale or use		8	
Ī	9	Prepaid expenses and deferred charges		9	8,338.
-	-	Land, buildings, and equipment: cost basis 10a 68, 499.			
		Less: accumulated depreciation. Complete Part VI of			
		Schedule D         10b         8,153.		10 c	60,346.
	11	Investments — publicly-traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	0.	16	147,366.
	17	Accounts payable and accrued expenses		17	895.
	18	Grants payable		18	
	19	Deferred revenue		19	
L	20	Tax-exempt bond liabilities		20	
A B	21	Escrow account liability. Complete Part IV of Schedule D		21	
l L I	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
Ţ,		of Schedule L		22	
E S	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	0.	26	895.
N		Organizations that follow SFAS 117, check here ▶ X and complete lines			
NET A		27 through 29 and lines 33 and 34.			146 481
Ş	27	Unrestricted net assets		27	146,471.
SET S	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
OR FU		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
DZD	30	Capital stock or trust principal, or current funds	er en en en production de comment en	30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
Ã	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ņ	33	Total net assets or fund balances.	0.	33	146,471.
BALAZCES	34	Total liabilities and net assets/fund balances.		34	147,366.
-	nt X		<b>U</b> 3	127	1 74//300.
re	irt A	Financial Statements and Reporting			Yes No
1		counting method used to prepare the Form 990:   Cash X Accrual	Other		
2		ere the organization's financial statements compiled or reviewed by an independent a			
		ere the organization's financial statements audited by an independent accountant?			
		Yes' to 2a or 2b, does the organization have a committee that assumes responsibility riew, or compilation of its financial statements and selection of an independent accou			2c X
3	<b>a</b> As Au	a result of a federal award, was the organization required to undergo an audit or aud dit Act and OMB Circular A-133?	its as set forth in the Si	ngle	3a X
	b If "	Yes,' did the organization undergo the required audit or audits?			
BA					Form <b>990</b> (2008)

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

Total

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 26-1509133 MY POSSIBILITIES Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 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.) 5 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) 7 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 X An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 Type III- Other Type II Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ..... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? ..... 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? ..... 11 g (iii) Provide the following information about the organizations the organization supports (v) Did you notify the organization in col. (i) of your support? (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (vii) Amount of Support (i) Name of Supported Organization (ii) FIN (iv) Is the (vi) Is the organization in col. (i) listed in your organization in col (i) organized in the U.S.? governing document? Yes No Yes No Yes No

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total (a) 2004 beginning in) > Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') . . . Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf ..... The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge ..... Total. Add lines 1-3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . Public support. Subtract line 5 from line 4 . . . . Section B. Total Support Calendar year (or fiscal year (e) 2008 (f) Total (b) 2005 (d) 2007 (c) 2006 (a) 2004 beginning in) ▶ Amounts from line 4 . . . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources . . . . . Net income form unrelated business activities, whether or not the business is regularly carried on ... Other income. Do not include 10 gain or loss form the sale of capital assets (Explain in Part IV.) ..... Total support. Add lines 7 through 10 ...... 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ..... Section C. Computation of Public Support Percentage % 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) ...... % Public support percentage for 2007 Schedule A, Part IV-A, line 26f ...... 16 a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18 Schedule A (Form 990 or 990-EZ) 2008 BAA

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

-	(Complete only if you check							
	tion A. Public Support		1		T	T	T	
	ndar year (or fiscal yr beginning in)▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	<b>(e)</b> 2008		(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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							
	Total. Add lines 1-5  Amounts included on lines 1, 2, 3 received from disqualified persons			141/161				
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000							
С	Add lines 7a and 7b							
8	Public support (Subtract line							
•	7c from line 6.)							
Sac	tion B. Total Support							
		4.2.0004		4 > 0005	(-I) 0007	<b>(e)</b> 2008	,	(f) Total
			1 (h) 200h					
	ndar year (or fiscal yr beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2006	-	(i) Total
9	Amounts from line 6	(a) 2004	<b>(b)</b> 2005	(c) 2006	(a) 2007	(e) 2008		(f) Total
9 10 a	Amounts from line 6	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2003		(f) Total
9 10 a b	Amounts from line 6	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2003		(f) Total
9 10 a b	Amounts from line 6	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2003		(f) Total
9 10 a b c 11	Amounts from line 6	s for the organize	ation's first, secon	d. third. fourth. o	or fifth tax year as	a section 501	(c)(3)	
9 10 a b c 11 12	Amounts from line 6	s for the organiza	ation's first, secon	d. third. fourth. o	or fifth tax year as	a section 501	(c)(3)	
9 10 a b c 11 12 13 14 Sec	Amounts from line 6	s for the organizatop hereblic Support i	ation's first, secon	d, third, fourth, o	or fifth tax year as	a section 501	(c)(3)	<b>X</b>
9 10 a b c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, 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.)  Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	s for the organiza stop here	ation's first, secon	d, third, fourth, o	or fifth tax year as	a section 501	(c)(3)	
9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6	s for the organizatop here	ation's first, secon Percentage  (f) divided by lin Part IV-A, line 27	d, third, fourth, o	or fifth tax year as	a section 501	(c)(3)	<b>X</b>
9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6	s for the organization here	Percentage  (f) divided by line Part IV-A, line 27  me Percentage	d, third, fourth, o	or fifth tax year as	a section 501	(c)(3)	×   X     %   %
9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6	s for the organiza stop here blic Support I 08 (line 8, column 2007 Schedule A, restment Inco	Percentage n (f) divided by lin Part IV-A, line 27 me Percentag column (f) divided	d, third, fourth, o e 13, column (f)) g the by line 13, column	r fifth tax year as	a section 501	(c)(3) 15 16	
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6	s for the organizatop here	Percentage  (f) divided by lin  Part IV-A, line 27  me Percentag  column (f) divided  le A, Part IV-A, lir	d, third, fourth, o e 13, column (f)) g d by line 13, colume 27h	r fifth tax year as	a section 501	(c)(3) 15 16	
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6	s for the organization dispose and stop here	Percentage  (f) divided by line  Part IV-A, line 27  me Percentag  column (f) divided  le A, Part IV-A, line d not check the book.	d, third, fourth, o e 13, column (f)) g d by line 13, column e 27h ox on line 14, and qualifies as a pu	mn (f)) d line 15 is more to blicly supported or	a section 501	(c)(3)  15 16  17 18 , and li	
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6	s for the organization die organization die organization die this box and stop	Percentage  (f) divided by line  Part IV-A, line 27  me Percentag  column (f) divided  le A, Part IV-A, line d not check the both The organization d not check a box phere. The organ	d, third, fourth, o e 13, column (f)) g d by line 13, colur e 27h ox on line 14, and qualifies as a pu on line 14 or 19a zation qualifies as	mn (f))  d line 15 is more to blicly supported on a publicly supported supported on a publicly suppo	a section 501  than 33-1/3%, rganization ore than 33-1 rted organiza	(c)(3) 15 16 17 18 , and li	

Schedule A	(Form 99	90 or 99	0-EZ) 2	2008	MY	POSSI	BIL	ITIES	3					2	6-150	09133		Page 4
Part IV	Supple	menta	al Info	rmati	ion. C	Comple	ete th	is par	t to p	rovide	e the	explana	ation re	equire	d by F	Part II	line 1	0;
	Part II,	line 1	7a or	17b;	or Pa	art IİI,	line 1	2. Pr	ovidė	any o	other	addition	nal info	ormati	on. (s	ee ins	truction	1s)
																		·
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#### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Employer Identification number

MY	POSSIBILITIES	26-1509133
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Fun	nds or Accounts Complete if
	Organizations Maintaining Donor Advised Funds or Other Similar Furthe organization answered 'Yes' to Form 990, Part IV, line 6.	'
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2		
3		
4		
7		
5	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund- used only for charitable purposes and not for the benefit of the donor or donor advisor or othe impermissible private benefit??	r — —
Pa	irt II Conservation Easements Complete if the organization answered 'Yes'	
	Purpose(s) of conservation easements held by the organization (check all that apply).	10 1 01111 330,1 are 17, mio 7.
•		of an historically important land area
		of certified historic structure
	Preservation of open space	of certified firstoric structure
2		of a conservation easement on the last day
۷.	of the tax year.	of a conservation casement on the last day
		Held at the End of the Year
	a Total number of conservation easements	2a
	b Total acreage restricted by conservation easements	2b
	c Number of conservation easements on a certified historic structure included in (a)	2c
	d Number of conservation easements included in (c) acquired after 8/17/06	
3		
	year ▶	
4		
5	enforcement of the conservation easement it holds?	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the	e year >
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the y	/ear ▶ \$
8	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and include, if applicable, the text of the footnote to the organization's financial statements that deconservation easements.	expense statement, and balance sheet, and escribes the organization's accounting for
Pa	ort III Organizations Maintaining Collections of Art, Historical Treasures, o	r Other Similar Assets
	Complete if the organization answered 'Yes' to Form 990, Part IV, line	e 8.
1	a If the organization elected, as permitted under SFAS 116, not to report in its revenue stateme treasures, or other similar assets held for public exhibition, education, or research in further the text of the footnote to its financial statements that describes these items.	nt and balance sheet works of art, historical nce of public service, provide, in Part XIV,
-	<b>b</b> If the organization elected, as permitted under SFAS 116, not to report in its revenue stateme treasures, or other similar assets held for public exhibition, education, or research in further amounts relating to these items:	ent and balance sheet works of art, historical noce of public service, provide the following
	(i) Revenues included in Form 990, Part VIII, line 1	▶\$
	(ii) Assets included in Form 990, Part X	
	If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 relating to these items:	
	a Revenues included in Form 990, Part VIII, line 1	
	h Appete included in Feyn 000 Port V	» ¢

3 Using the organization's accession that apply):	n and other reco	ords, check any of the	following that are a sigr	nificant use of its collecti	on items (che	eck all
a Public exhibition		<b>d</b> Loan o	r exchange programs			
b Scholarly research		e Other				
c Preservation for future genera	utions					
4 Provide a description of the organ		ions and explain how t	hey further the organiza	ation's exempt purpose i	n	
Part XIV.						
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or rec other than to be	ceive donations of art, maintained as part of	historical treasures, or other organization's collection	other similar	Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arrai an amount c	<b>ngements</b> Comple on Form 990, Part	ete if organization a X, line 21.	answered 'Yes' to F	orm 990, F	'art
1 a Is the organization an agent, trust included on Form 990, Part X?				assets not [	Yes	No
<b>b</b> If 'Yes,' explain the arrangement in	n Part XIV and	complete the following	table:			
					Amount	
c Beginning balance				1c		
d Additions during the year			, , , , , , , , , , , , , , , , , , , ,	1d		
e Distributions during the year				1e		···
f Ending balance				1f		
2a Did the organization include an ar	mount on Form	990, Part X, line 21? .	. , , ,		Yes	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV					
Part V   Endowment Funds Co	mplete if org	anization answere	ed 'Yes' to Form 99	0, Part IV, line 10.		
	(a) Current ye		1		(e) Four ye	ars back
1 a Beginning of year balance						
<b>b</b> Contributions						
c Investment earnings or losses				2 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
d Grants or scholarships	***************************************					
e Other expenditures for facilities	Waller					
and programs						
f Administrative expenses	<u></u>					
<b>g</b> End of year balance					<u> </u>	
2 Provide the estimated percentage	of the year end	d balance held as:				
a Board designated or quasi-endow		%				
<b>b</b> Permanent endowment ▶						
c Term endowment ▶						
<b>3a</b> Are there endowment funds not in organization by:	the possession	n of the organization th	nat are held and admini	stered for the	Yes	No
(i) unrelated organizations	, , , , , , , , , , , , , , , , , , , ,				. 3a(i)	
(ii) related organizations					3a(ii)	
<b>b</b> If 'Yes' to 3a(ii), are the related o						
4 Describe in Part XIV the intended						
Part VI Investments-Land, B				, line 10.		
Description of investment		a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	<b>(d)</b> Book	Value
<b>1a</b> Land	. , , . ,					
<b>b</b> Buildings	_					
c Leasehold improvements	_					
d Equipment			68,499.	8,153.	6	0,346
<b>e</b> Other	f				***************************************	
Total. Add lines 1a-1e (Column (d) sho		990. Part X. column (	B), line 10(c),)		6	0,346
DAA	a.a oqual i olili	(			dule <b>D</b> (Form	

Part VII Investments-Other Securities See Fo	orm 990, Part X, Iir	ne 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(including name of security)  Financial derivatives and other financial products		Cost or enu-or-year market value
Closely-held equity interests		
Other		
Other		
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.) ▶	The state of the s	
Part VIII Investments-Program Related (See		line 13)
(a) Description of investment type	(b) Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
		Cook of other of your marrier taxage
A A A A A A A A A A A A A A A A A A A		
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.)	1: 15)	
Part IX Other Assets (See Form 990, Part X,		<b>(b)</b> Book value
(a) De	escription	(b) Book Value
	MANAGE	
	nativiti.	
	Manua	
Total. Column (b) Total (should equal Form 990, Part X, col	l.(B), line 15)	▶
Part X Other Liabilities (See Form 990, Part	X, line 25)	
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	<b>&gt;</b>	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Pa	rt XI   Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)		343,977.
2	Total expenses (Form 990, Part IX, column (A), line 25)		197,506.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		146,471.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities	·	
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4-8		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		146,471.
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per I		
1	Total revenue, gains, and other support per audited financial statements	1	343,977.
2			
	a Net unrealized gains on investments	_	
	b Donated services and use of facilities	_	
	c Recoveries of prior year grants		
	d Other (Describe in Part XIV)	_	
	e Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	343,977.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV)		
	c Add lines <b>4a</b> and <b>4b</b>		,
	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		343,977.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses pe		
1	Total expenses and losses per audited financial statements	1	197,509.
2			
	a Donated services and use of facilities		
	b Prior year adjustments		
	c Losses reported on Form 990, Part IX, line 25		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	3	197,509.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV)	_	
	c Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	197,509.
Pa	rt XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.		

Schedule D (Form 990) 2008 MY POSSIBILITIES  Part XIV   Supplemental Information (continued)	26-1509133	Page 5
Part XIV   Supplemental Information (continued)		
	<u></u>	
	555 0559 V509 V009 500 500 500 500 500 500 500 500 500	
	·	
		· · · · · ·

# SCHEDULE M (Form 990)

#### **Non-Cash Contributions**

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

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

MY POSSIBILITIES

Name of the organization

Employer identification number 26-1509133

Par	t I Types of Property		T			
		(a) Check if applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of deterr revenues	mining
1	Art-Works of art					
2	Art-Historical treasures					***************************************
3	Art–Fractional interests					
4	Books and publications	at-a				
5	Clothing and household goods					
6	Cars and other vehicles		SSS (Control Standard Control Standard			
7	Boats and planes					
8	Intellectual property					
9	Securities—Publicly traded					
10	Securities-Closely held stock					
11	Securities-Partnership, LLC, or trust interests					
12	Securities-Miscellaneous					
13	Qualified conservation contribution (historic structures)					
14	Qualified conservation contribution (other)					
15	Real estate—Residential					
16	Real estate—Commercial					
17	Real estate—Other					
18	Collectibles					
19	Food inventory					~
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ▶ (FURNITURE/EQUIPMENT_)	X	246		REPLACEMENT	
26	Other ▶ (COMPUTERS)	X	19			COSTS
27	Other ▶ (TELEPHONE SYSTEM )	X	2	10,600.	REPLACEMENT	COSTS
28	Other ▶ ( )	<u> </u>				
29	Number of Forms 8283 received by the organization	on during the	tax year for contributio	ns for which the	20	
	organization completed Form 8283, Part IV, Dones	Acknowled	igement		29   Ye	s No
						:5   110
30 a	During the year, did the organization receive by co hold for at least three years from the date of the in	intribution a	ny property reported in F	Part I, lines 1-28 that it	must	
	purposes for the entire holding period?				1 _ 1	x
1.	31			,.,.,.,.,.,.,.,.,.	300	1 22
	olf 'Yes,' describe the arrangement in Part II.	w that ragui	rae tha raviow of any no	on-standard contribution	ıs? <b>31</b>	X
	51 Boos the organization have a gift decoptance princy that requires the return of any					
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?					X	
L	olf 'Yes,' describe in Part II.			,,,		
33	If the organization did not report revenues in colur describe in Part II.	nn (c) for a	type of property for which	cn column (a) is checke	eu,	

Schedule M (Form 990) 2008 MY POSSIBILITIES	26-15091	.33	Page 2
Part II Supplemental Information. Complete this part to provide the information required and 33. Also complete this part for any additional information.	by Part I,	lines 30b,	32b,
			. <del></del> .

#### 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.

Employer identification number Name of the organization 26-1509133 **POSSIBILITIES** Pt VI-B, Line 15 THE ORGANIZATION RESEARCHES CURRENT MARKET RATES FOR \_SIMILAR POSITIONS. Pt VI-C, Line 19 THE ORGANIZATION MAKES ITS TAX RETURN AVAILABLE ON THEIR WEBSITE, AND OTHER DOCUMENTS AVAILABLE BY REQUEST. Pt VI-A, Line 10 THE ORGANIZATION'S BOARD WILL REVIEW THE 990 PRIOR TO Pt VI-B, Line 12c FILING FOR ACCURACY THERE IS NO FORMAL MONITORING PROCEDURE IN PLACE. THE POLICIES ARE ENFORCED BY THE HONOR SYSTEM. THE FINANCE COMMITTEE SELECTS THE AUDIT FIRM, AND SELECTS ACCOUNTING POLICIES AND PROCEDURES.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

ENHANCE QUALITY OF LIFE AND PRESERVE THE DIGNITY OF ADULTS WITH

SPECIAL NEEDS WITHIN COLLIN COUNTY AND SURROUNDING AREAS.