2008 TAX RETURN

Government Copy								
Client:	CATCHING							
Prepared for:	Catching the Dream 8200 Mountain Road NE Suite 203 Albuquerque, NM 87110 505.262.2351							
Prepared by:	Gary E. Hellmer, CPA Gary E. Hellmer, CPA 5808 McLeod NE, Suite O Albuquerque, NM 87109 (505) 884-5965							
Date:	March 30, 2007							
Comments:	COPY							
Route to:								

FDIL2001L 05/01/08

Catching the Dream 8200 Mountain Road NE Suite 203 Albuquerque, NM 87110

> Department of Treasury Internal Revenue Service Ogden, UT 84201-0027

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)

2008

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

	For the	e 2008 calendar year, or tax year beginning 7/01	, 2008, and endin	g 6/3	30	, 2009
В	Check if	applicable:			D Employer lo	dentification Number
	hhA	Please use IRS label Catching the Dream			85-03	60858
	$\overline{}$	or print 10000 Mountain Dood NE 40	0.3	-	E Telephone	
	$\overline{}$	See Albuquerque NM 87110				
	Initia	al return specific Instruc-			505.2	62.2351
	Terr	mination tions.				
	X Ame	ended return			G Gross recei	pts \$ 390,503.
	App	olication pending F Name and address of principal officer: Dean Char	vers, PHD	H(a) Is this a	group return fo	r affiliates? Yes X No
		Same As C Above			affiliates include	
$\overline{}$	Tav	·	47(a)(1) or 527	If 'No,' a	attach a list. (see	e instructions)
÷			· · · · · · · · · · · · · · · · · · ·			_
<u>J</u>		site: N/A			exemption number	
<u>K</u>		of organization: X Corporation Trust Association Other ►	L Year of Formati	on:	M State	e of legal domicile: NM
Pa	rt I	Summary				
	1 E	Briefly describe the organization's mission or most significant a	ctivities: Provide	college	e schola	arships and
ø.		<u>improved educational opportunities for</u>				
Governance	_					
Шa	_					
ě	2	Check this box Figure if the organization discontinued its opera	etions or disposed of more	than 250	6 of its asse	
ဗ		Number of voting members of the governing body (Part VI, line				
જ		Number of independent voting members of the governing body				3 9 4 8 5 3
ies		Fotal number of employees (Part V, line 2a)				5 3
≅		Fotal number of volunteers (estimate if necessary)				6 0
Activities &		Fotal gross unrelated business revenue from Part VIII, line 12,				7a 0.
-		Net unrelated business taxable income from Fart viii, line 12,				7b 0.
	D I	vet uniferated business taxable income from Form 990-1, line 3	4		•	
					rior Year	Current Year
ø)		Contributions and grants (Part VIII, line 1h)			527,897	
Ž	9 F	Program service revenue (Part VIII, line 2g)			104,099	91,128.
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d).			36,483	3. 17,373.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, a				
		Total revenue – add lines 8 through 11 (must equal Part VIII,			668,479	9. 390,503.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3			165,067	
		Benefits paid to or for members (Part IX, column (A), line 4)	1	100,00	220,3001	
			1	126,237	140 666	
o o		Salaries, other compensation, employee benefits (Part IX, colu		120,23	7. 140,666.	
Š	16a F	Professional fundraising fees (Part IX, column (A), line 11e)				
Expenses	b⊺	Fotal fundraising expenses (Part IX, column (D), line 25) ►	52,162.			
úì		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)			182,023	3. 120,141.
					473,327	
		Total expenses. Add lines 13-17 (must equal Part IX, column (· ·	_		
	19 F	Revenue less expenses. Subtract line 18 from line 12			195,152	
Net Assets or Fund Balances				Begin	ning of Year	r End of Year
sets	20 T	Fotal assets (Part X, line 16)			948,655	754,561.
A B	21 7	Total liabilities (Part X, line 26)			3,800	7,537.
ξĒ	22 N	Net assets or fund balances. Subtract line 21 from line 20			944,855	
Pa	rt II	Signature Block			J44,030	747,024.
1 6	11 (11					
		Under penalties of perjury, I declare that I have examined this return, including a true, correct, and complete. Declaration of preparer (other than officer) is based	accompanying schedules and stat on all information of which prepa	ements, and rer has any k	to the best of my	y knowledge and belief, it is
				i I		
Siç	gn					
He	re	Signature of officer		Dat	e	
		► Dean Chavers, PHD		Execu	itive Di	rec
		Type or print name and title.				
			Date	Ch	eck if	Preparer's identifying number (see instructions)
Pa	id			se	lf 137	(see instructions)
Pre	.u	Preparer's signature		em	nployed > X	-
	rer's	-				P00872342
Us		Firm's name (or yours if self-				
On		employed), ► 5808 MCLeod NE, Suite O	EIN ► 85-0341476			
		address, and ZIP + 4 Albuquerque, NM 87109	Phone no. ► (505) 884-5965			
May	the IR	RS discuss this return with the preparer shown above? (see ins	tructions)			. X Yes No

) (Revenue

(Must equal Part IX, Line 25, column (B).)

including grants of

333,227.

▶ \$

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

4e Total program service expenses

(Expenses

Form 990 (2008) Catching the Dream Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV.</i>	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Χ
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Χ
t	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III.	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	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	37	Х
22	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	X	
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J.	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	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		Х
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I.	25b		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
BAA		Form	990	(2008)

Form 990 (2008) Catching the Dream Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
á	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		X
ŀ	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
Ó	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2.	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
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		Х
BAA	COPY	Form	n 990 ((2008)

12a

	n 990 (2008	′		85-036085	8	P	age 5
aı	rt V	Statements Regarding Other IRS Filings and Tax Compliance					
				•		Yes	No
1 a	a Enter the Information	number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. on Returns. Enter -0- if not applicable.	1a	0			
ŀ	b Enter the	number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
(ت Did the or gambling)	ganization comply with backup withholding rules for reportable payments to vendors) winnings to prize winners?	and r	eportable gaming	1 c		
2	a Enter the nu	mber of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the or within the year covered by this return.	2a	3			
21	_	one is reported on line 2a, did the organization file all required federal employment	tax re	turns?	2b	Χ	
		ne sum of lines 1a and 2a is greater than 250, you may be required to e-file this retu					
3	a Did the or	ganization have unrelated business gross income of \$1,000 or more during the year		•	3a		Х
ŀ	b If 'Yes' ha	as it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O			3b		
	financial	ne during the calendar year, did the organization have an interest in, or a signature of account in a foreign country (such as a bank account, securities account, or other fire	or othe nancial	er authority over, a account)?	4a		Х
ı		nter the name of the foreign country:		Dank and			
		nstructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of F Accounts.	oreign	Bank and			
		organization a party to a prohibited tax shelter transaction at any time during the tax	-		5a		X
ŀ	b Did any ta	axable party notify the organization that it was or is a party to a prohibited tax shelte	r trans	saction?	5b		X
(c If 'Yes,' to Prohibited	o question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp d Tax Shelter Transaction?	t Entity	y Regarding	5c		
68	a Did the or	ganization solicit any contributions that were not tax deductible?			6a		Χ
ł		id the organization include with every solicitation an express statement that such core?			6b		
7	Organiza	tions that may receive deductible contributions under section 170(c).		,			
á	a Did the or	ganization provide goods or services in exchange for any quid pro quo contribution	of more	e than \$75?	7a		Χ
		id the organization notify the donor of the value of the goods or services provided? .			7b		
	c Did the or	rganization sell, exchange, or otherwise dispose of tangible personal property for white 2?			7с		Х
(ndicate the number of Forms 8282 filed during the year	7d		, ,		
•	e Did the or benefit co	rganization, during the year, receive any funds, directly or indirectly, to pay premium intract?	s on a	personal	7e		Х
f		ganization, during the year, pay premiums, directly or indirectly, on a personal bene	fit con	tract?	7 f		Χ
		ntributions of qualified intellectual property, did the organization file Form 8899 as re		1	7g		Χ
Ì	h For all co	ntributions of cars, boats, airplanes, and other vehicles, did the organization file a Fo	orm 10	98-C as required?	7h		Χ
	Section 5	01(c)(3) and other sponsoring organizations maintaining donor advised funds and ig organizations. Did the supporting organization, or a fund maintained by a sponsor					
	excess bu	isiness holdings at any time during the year?			8		
9		01(c)(3) and other sponsoring organizations maintaining donor advised funds.					
		ganization make any taxable distributions under section 4966?			9a		
		ganization make any distribution to a donor, donor advisor, or related person?			9b		
		01(c)(7) organizations. Enter:	1 . 1				
		fees and capital contributions included on Part VIII, line 12	10a				
		ceipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
		01(c)(12) organizations. Enter:	 _				
		ome from other members or shareholders	11a				
ŀ	Gross inc amounts	ome from other sources (Do not net amounts due or paid to other sources against due or received from them.)	11b				

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year...... 12b BAA Form **990** (2008)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.....

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

<u> </u>	ction A. Governing Body and Management								
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		Yes	No					
1:	a Enter the number of voting members of the governing body	9							
l	b Enter the number of voting members that are independent	8							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		Χ					
3		3		Х					
4	Did the organization make any significant changes to its organizational documents	4		X					
•	since the prior Form 990 was filed?	<u> </u>		21					
5	Did the organization become aware during the year of a material diversion of the organization's assets?			Х					
6	Does the organization have members or stockholders?			Χ					
7	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?			Х					
	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?								
	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
	a The governing body?		X						
	b Each committee with authority to act on behalf of the governing body?			X					
9	a Does the organization have local chapters, branches, or affiliates?	9a		X					
ı	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b							
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990See. Schedule .O	10		Х					
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	11		Х					
Sec	ction B. Policies								
JU	CHOIL D. 1 OHCIES								
	201		Yes	No					
	a Does the organization have a written conflict of interest policy? If No, 'go to line 13	12a	Yes	No X					
12:	201	12a	Yes						
12:	a Does the organization have a written conflict of interest policy? If No, go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.	12b	Yes	X X X					
12:	a Does the organization have a written conflict of interest policy? If No, 'go to line 13	12b	Yes	X X X X					
12:	a Does the organization have a written conflict of interest policy? If No, go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy?	12b 12c 13	Yes	X X X					
12:	a Does the organization have a written conflict of interest policy? If No, go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?. c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	12b 12c 13	Yes	X X X X					
12: 13 14 15	a Does the organization have a written conflict of interest policy? If No, 'go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	12b 12c 13 14	Yes	X X X X X					
12: 13 14 15	a Does the organization have a written conflict of interest policy? If No, 'go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?. c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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:	12b 12c 13	Yes	X X X X					
12: 13 14 15	a Does the organization have a written conflict of interest policy? If No, 'go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?. c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official?	12b 12c 13 14	Yes	X X X X X					
122 13 14 15	a Does the organization have a written conflict of interest policy? If No, 'go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization?	12b 12c 13 14 15a 15b	Yes	X X X X X					
12: 13 14 15 16:	a Does the organization have a written conflict of interest policy? If (No,' go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?. b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt	12b 12c 13 14 15a 15b 16a	Yes	X X X X X					
12: 13 14 15 16:	a Does the organization have a written conflict of interest policy? If No, go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b 16a	Yes	X X X X X					
12: 13 14 15 16:	a Does the organization have a written conflict of interest policy? If 'Wo,' go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b 16a	Yes	X X X X X					
12: 13 14 15 16:	a Does the organization have a written conflict of interest policy? If No, 'go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etiton C. Disclosures List the states with which a copy of this Form 990 is required to be filed None	12b 12c 13 14 15a 15b 16a		X X X X X X					
12: 13 14 15 16:	a Does the organization have a written conflict of interest policy? If (No, '90 to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Ction C. Disclosures List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b 16a		X X X X X X					
12: 13 14 15 16: 1 Sec 17 18	a Does the organization have a written conflict of interest policy? If (No, '90 to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Ction C. Disclosures List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b 16a 16b	for pu	X X X X X X X D D D D D D D D D D D D D					

BAA Form **990** (2008)

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 \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did no	1	sate ar	ny of			rector	, tru			
(A)	(B)							(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director	Institutional trustee	Check Officer	al Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
James Lujan		v		v				0	0	0
President	0	Х		X				0.	0.	0.
Darrell F. Jeanotte	_	37		3.7				0	0	0
Vice President	0	Х		Х				0.	0.	0.
Jodie Palmer		v		Х				0	0.	0
Treasurer Dean Chavers, PHD	0	X		Λ				0.	0.	0.
	40	Х		Х	v		1	52,201.	0.	0.
Executive Direc Ed Harris	40	Λ		^	X		-	32,201.	0.	0.
Director	0	Х						0.	0.	0.
Lindsay Wagner	U	Λ						0.	0.	0.
Director	0	Х						0.	0.	0.
Gloria Hale	0	Λ						0.	0.	<u> </u>
Director	0	Х		Χ				0.	0.	0.
John Tohtsoni, Jr.		- 21		- 23				0.	0.	
Director	0	Х						0.	0.	0.
Parry Meas Murry	-									
Director	0	Χ						0.	0.	0.

Form 990 (2008) Catching the Dream									85-036085		Р	age 8
Part VII Section A. Officers, Directors, Trus	tees, l	Key	En	npl	oye	ees	, ar	nd Highest Co		oloye	es (co	ont.)
(A)	(B)	, ,				(D)	(E)		(F)			
Name and Title	Average hours per week		Institutional trustee	Officer		at Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amor com f org ar	stimated unt of oth opensation the ganization of related anization	on n d
						1	1					
				7	F		1					
		U										
1 b Total								52,201.	0.			0.
2 Total number of individuals (including those in 1a) w organization ► 0	ho recei	ved	mor	e th	an S	\$100),000) in reportable cor	npensation from the	!		
3 Did the organization list any former officer, director of	or truste	e, ke	ey er	nplo	oyee	e, or	higl	nest compensated	employee		Yes	No
 on line 1a? If 'Yes,' complete Schedule J for such inc For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th 	ortable	com	pen:	satio	on a	and c	othei	r compensation from	om	. 3		X
individual										. 4		X
rendered to the organization? If 'Yes,' complete Sche	edule J	for s	uch	pers	son					. 5		X
Section B. Independent Contractors Complete this table for your five highest compensate compensation from the organization.	d indep	ende	ent c	ontr	racto	ors t	hat	received more tha	n \$100,000 of			
(A) Name and business address	6							(B) Description () of Services	(Compe	C) ensatio	n
								P		1		
2 Total number of independent contractors (including to compensation from the organization ► 0	hose in	1) w	ho r	ece	ived	l mo	re th	nan \$100,000 in				

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Pai	rt VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contribns included in Ins 1a-1f: \$ h Total. Add lines 1a-1f. >	282,002.			
PROGRAM SERVICE REVENUE	Business Code 2a Consulting b Exemplary Institute c Publications d Miscellaneous e Mailing lists f All other program service revenue g Total. Add lines 2a-2f.	31,217. 25,581. 13,168. 21,162.	31,217. 25,581. 13,168. 21,162.		
OTHER REVENUE PR	g Total. Add lines 2a-2f. 3 Investment income (including dividends, interest and other similar amounts). 4 Income from investment of tax-exempt bond proceeds. 5 Royalties. 6a Gross Rents. b Less: rental expenses. c Rental income or (loss). d Net rental income or (loss). 7a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses. c Gain or (loss). d Net gain or (loss). d Net gain or (loss). 6 Net income from fundraising events (not including. \$ of contributions reported on line 1c). See Part IV, line 18. a b Less: direct expenses. b c Net income or (loss) from fundraising events. 9a Gross income from gaming activities. See Part IV, line 19. a b Less: direct expenses. b c Net income or (loss) from gaming activities. See Part IV, line 19. a b Less: cost of goods sold. b c Net income or (loss) from sales of inventory. Miscellaneous Revenue Business Code 11a b C d All other revenue. e Total. Add lines 11a-11d.	91,128. 17,373.	17,373.		
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	390,503.	108,501.	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).

	All other organizations must comp				(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	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	228,905.	228,905.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	52,201.	20,880.	20,880.	10,441.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	64,479.	25,792.	25,792.	12,895.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	8,112.	3,245.	3,245.	1,622.
9	Other employee benefits	4,821.	1,928.	1,929.	964.
10	Payroll taxes	11,053.	4,421.	4,421.	2,211.
11	Fees for services (non-employees)	,	,	,	•
	Management				
	Legal				
	Accounting	10,143.	4,057.	4,057.	2,029.
	Lobbying	,	,	,	,
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	j Other				
	Advertising and promotion		DY		
13	Office expenses.	9,145.	3,658.	3,658.	1,829.
14	Information technology	<i>('.</i> \		·	
15	Royalties				
16	Occupancy	14,520.	5,808.	5,808.	2,904.
17	Travel	6,927.	2,771.	2,771.	1,385.
18	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,540.	1,416.	1,416.	708.
23	Insurance				
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.)				
ā	Dues and publications	24,345.	9,738.	9,738.	4,869.
	Postage and Shipping	19,836.	7,934.	7,934.	3,968.
(Exemplary institute	15,637.	6,255.	6,255.	3,127.
c	Telephone	5,035.	2,014.	2,014.	1,007.
	Printing and Publications	3,153.	1,261.	1,261.	631.
	All other expenses	7,860.	3,144.	3,144.	1,572.
	Total functional expenses. Add lines 1 through 24f	489,712.	333,227.	104,323.	52,162.
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		·		
ВАА				L	Form 990 (2008)

			(A) Beginning of year		(E End o	3) of year	
	1	Cash – non-interest-bearing		1	2	83.4	134.
	2	Savings and temporary cash investments	-	2	_		
	3	Pledges and grants receivable, net.		3			
	4	Accounts receivable, net.		4			
	5	Receivables from current and former officers, directors, trustees, key employees, 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 E T S	7	Notes and loans receivable, net		7			
Ē	8	Inventories for sale or use		8			
Š	9	Prepaid expenses and deferred charges	1,656.	9		2,2	<u> 243.</u>
	10 a	Land, buildings, and equipment: cost basis	_				
	b	Less: accumulated depreciation. Complete Part VI of					
		Schedule D. 10b 19,946.	8,306.	10c			588.
	11	Investments — publicly-traded securities		11	4	63,2	<u> 296.</u>
	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)		16	7		561.
	17	Accounts payable and accrued expenses		17		7,	<u> 37.</u>
	18	Grants payable		18			
	19	Deferred revenue		19			
Ī	20	Tax-exempt bond liabilities.		20			
A B I	21	Escrow account liability. Complete Part IV of Schedule D.		21			
Ĺ	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	3,800.	26		7,	537.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34.					
A	27	Unrestricted net assets	540,482.	27	5	21,4	160.
AS S E T	28	Temporarily restricted net assets		28			L02.
Š	29	Permanently restricted net assets.	493,688.	29			162.
Q R		Organizations that do not follow SFAS 117, check here ► and complete	·				
F		lines 30 through 34.					
F U N D	30	Capital stock or trust principal, or current funds		30			
В	31	Paid-in or capital surplus, or land, building, and equipment fund		31			
Ĺ	32	Retained earnings, endowment, accumulated income, or other funds		32			
BALANCES	33	Total net assets or fund balances.		33)24.
	34	Total liabilities and net assets/fund balances.	948,655.	34	7	54,5	561.
Pa	rt X	Financial Statements and Reporting					
_			l ou			Yes	No
1		counting method used to prepare the Form 990: Cash X Accrual	Other		2-		v
		re the organization's financial statements compiled or reviewed by an independent a re the organization's financial statements audited by an independent accountant?			1		X
		re the organization's financial statements addited by an independent accountant? Yes' to 2a or 2b, does the organization have a committee that assumes responsibility			20		Λ
	rev	iew, or compilation of its financial statements and selection of an independent account a result of a federal award, was the organization required to undergo an audit or audit or account a result of a federal award, was the organization required to undergo an audit or audit or account a result of a federal award, was the organization required to undergo an audit or account a result of a federal award, was the organization required to undergo an audit or account and the federal award, was the organization required to undergo an audit or account and the federal award.	ıntant?		2c		
3	Au	a result of a federal award, was the organization required to undergo an addit of add dit Act and OMB Circular A-133?	יייייייייייייייייייייייייייייייייייייי		За		Χ
		Yes,' did the organization undergo the required audit or audits?					
BA	۸				Form	990	(2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number Name of the organization Catching the Dream 85-0360858 **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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 **170(b)(1)(A)(iv).** (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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 Χ 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 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 11 describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated Type II а С d Type III - Other 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 TyperI, 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 Yes a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 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 h (v) Did you notify the organization in col. (i) of (i) Name of Supported Organization (ii) EIN (iii) Type of organization (iv) Is the (vi) Is the (vii) Amount of Support (described on lines 1-9 above or IRC section rganization in col (i) listed in your organization in col.

(i) organized in the your support? (see instructions)) governing document? US? Yes Yes No Yes No No Total

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

Schedule A (Form 990 or 990-EZ) 2008

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 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) > Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.'). . . . 547,724 539,878 335,366 527,897 282,002 2,232,867. Tax revenues levied for the organization's benefit and either paid to it or expended 0. 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 0. 335,366 Total. Add lines 1-3..... 547,724 539,878 527,897 282,002. 867. 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)... 0. Public support. Subtract line 5 2,232,867. from line 4 Section B. Total Support Calendar year (or fiscal year (c) 2006 (a) 2004 (d) 2007 (e) 2008 (b) 2005 (f) Total beginning in) 547,724 539,878 366 527,897 282,002 232,867. **7** Amounts from line 4... Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form <u>13,0</u>97 99,653. 10,100 600 36,483 17,373 similar sources..... Net income form unrelated business activities, whether or not the business is regularly 0. 10 Other income. Do not include gain or loss form the sale of capital assets (Explain in 0. Part IV.)..... Total support. Add lines 7 2,332,520. through 10...... 12 Gross receipts from related activities, etc. (see instructions)..... 0. 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 95.7% 14 97.7% 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f..... 16a 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 X 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.......... **b 10%-facts-and-circumstances test** – **2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization......

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

Schedule A (Form 990 or 990-EZ) 2008 Catching the Dream Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chec	ked the box on lir	ne 9 of Part I.)					
Sec	tion A. Public Support							
Cale	ndar year (or fiscal yr beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include '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							
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.							
C	Add lines 7a and 7b							
8	Public support (Subtract line							
	7c from line 6.)			AV				
	tion B. Total Support			VI	T	1		
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Total
	Amounts from line 6							
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
11	Add lines 10a and 10b							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).							
	Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	▶□
Sec	tion C. Computation of Pu	blic Support I	Percentage					· · · ·
	Public support percentage for 200			e 13, column (f)).			15	%
	Public support percentage from 2	•	• •				16	%
	tion D. Computation of Inv					1	·	
17	Investment income percentage for				nn (f))		17	%
18	Investment income percentage from	•	` '		***	<u> </u>	18	%
	33-1/3 support tests – 2008. If the more than 33-1/3%, check this bo	e organization did ox and stop here.	not check the bo The organization	x on line 14, and qualifies as a pub	line 15 is more the	nan 33-1/3%, a ganization		•
	33-1/3 support tests – 2007. If the is not more than 33-1/3%, check							
20	Private foundation. If the organiz	ation did not ched	k a box on line 14	4, 19a, or 19b, ch	eck this box and s	ee instruction	S	▶

Schedule A	(Form 990 or 990	D-EZ) 2008	Catching	the Dre	am		85-0360858	Page 4
Part IV	Supplementa	l Informati	ion. Comple	te this pa	rt to provide th	ne explanation r	equired by Part II, ormation. (see inst	line 10;
	Part II, line 1	7a or 17b;	or Part III, I	ine 12. Pr	ovide any oth	er additional info	ormation. (see inst	ructions)
						1		
					00			
				C	OP?			
					/			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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.

Open to Public Inspection

Employer Identification number

∠d L	ching the Dream		85-0360858
Par	Organizations Maintaining Donor Ac	lvised Funds or Other Similar Fur	nds or Accounts Complete if
	the organization answered 'Yes' to Fo	· · · · · · · · · · · · · · · · · · ·	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3			
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor adfunds are the organization's property, subject to the	visors in writing that the assets held in don organization's exclusive legal control?	nor advised Yes No
	Did the organization inform all grantees, donors, an used only for charitable purposes and not for the be impermissible private benefit??		Yes No
Par	t II Conservation Easements Complete	f the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recrea	tion or pleasure) Preservation c	of an historically important land area
	Protection of natural habitat	Preservation of	of certified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qual of the tax year.	ified conservation contribution in the form of	of a conservation easement on the last day
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified hi	storic structure included in (a)	2c
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d
3	Number of conservation easements modified, transf	erred, released, extinguished, or terminate	d by the organization during the taxable
	year ►	(,0,	
4	Number of states where property subject to conserv	ation easement is located ►	_
5	Does the organization have a written policy regarding enforcement of the conservation easement it holds?	ng the periodic monitoring, inspection, viola	ations, and Yes No
6	Staff or volunteer hours devoted to monitoring, insp	ecting, and enforcing easements during the	e year 🕨
7	Amount of expenses incurred in monitoring, inspect	ing, and enforcing easements during the ye	ear ► \$
8	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sect	tion Yes No
9			
	In Part XIV, describe how the organization reports of include, if applicable, the text of the footnote to the conservation easements.		
Par	Complete if the organization answer	ons of Art, Historical Treasures, oned 'Yes' to Form 990, Part IV, line	or Other Similar Assets e 8.
1 a	If the organization elected, as permitted under SFA treasures, or other similar assets held for public ext the text of the footnote to its financial statements the	nibition, education, or research in furtherand	nt and balance sheet works of art, historical ce of public service, provide, in Part XIV,
b	If the organization elected, as permitted under SFA treasures, or other similar assets held for public extamounts relating to these items:	nibition, education, or research in furtherand	ce of public service, provide the following
	(i) Revenues included in Form 990, Part VIII, line	J	> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, his amounts required to be reported under SFAS 116 re	torical treasures, or other similar assets for	
а	Revenues included in Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		

Part III Organizations Mainta	ining Colle	ections of Ar	t, mistori	icai Treasures, oi	Other Similar As	sets (cont	muea)
3 Using the organization's accession that apply):	n and other re	ecords, check ar	ny of the fo	llowing that are a sign	ificant use of its collect	tion items (ch	neck all
a Public exhibition		d	Loan or e	exchange programs			
b Scholarly research		е	Other				
c Preservation for future genera	ations						
4 Provide a description of the organ Part XIV.		ections and expl	ain how the	ey further the organiza	tion's exempt purpose	in	
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or rather than to b	receive donation be maintained a	is of art, his	storical treasures, or o	ther similar	Yes	No
Part IV Trust, Escrow and Cu						Form 990	Part
IV, line 9, or reported	an amoun	t on Form 99	00, Part >	K, line 21.			Tart
1 a Is the organization an agent, trust included on Form 990, Part X?					assets not	Yes	No
b If 'Yes,' explain the arrangement i	in Part XIV ar	nd complete the	following to	able:		Amount	
c Beginning balance						711104111	
d Additions during the year							
e Distributions during the year							
f Ending balance							
2a Did the organization include an ar		n 990, Part X, I	ine 21?			Yes	No
b If 'Yes,' explain the arrangement i							
Part V Endowment Funds Co	mplete if o	rganization a	answered	d 'Yes' to Form 99	<u>90, Part IV, line 10</u>	<u>).</u>	
	(a) Current	year (b)	Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars back
1 a Beginning of year balance							
b Contributions							
c Investment earnings or losses							
d Grants or scholarships							
e Other expenditures for facilities and programs				-1			
f Administrative expenses							
g End of year balance			• ()				
2 Provide the estimated percentage		nd balance held	as				
a Board designated or quasi-endow		2					
b Permanent endowment ►		。					
c Term endowment ►	°						
3a Are there endowment funds not in	the possessi	on of the organ	ization that	are held and adminis	tered for the	Vaa	T No
organization by:						Yes	No
(i) unrelated organizations						3a(i)	
(ii) related organizations						3a(ii)	_
b If 'Yes' to 3a(ii), are the related or	-					3b	
4 Describe in Part XIV the intended							
Part VI Investments—Land, B	<u>uildings, a</u>	nd Equipme	nt. See	<u>Form 990, Part X</u>	, line 10.		
Description of investment		(a) Cost or othe (investment)	r basis nt)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book \	√alue
1 a Land		1,	951.				1,951.
b Buildings							
c Leasehold improvements	ŀ						
d Equipment	ŀ						
e Other	ŀ	23	583.		19,946.		3,637.
				lino 10(a) \	1		5,637. 5,588.
Total. Add lines 1a-1e (Column (d) shot	uia equai Fori	11 990, Part X, C	:viumn (B),	ште ти(с).)			•
BAA					Sched	dule D (Form	99U) 2UU8

Schedule **D** (Form 990) 2008

Part VII Investments—Other Securities See F		ne 12. N/A		00030 Fage :
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua	ation
		Со	st or end-of-year mar	ket value
Financial derivatives and other financial products				
Closely-held equity interests				
Other	 			
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)				
Part VIII Investments—Program Related (See	Form 990. Part X.	line 13)	I/A	
(a) Description of investment type	(b) Book value		(c) Method of valua	ation
		Со	st or end-of-year mar	ket value
	 			
Tabal Column (h)(abauld amusl Farm 000 Dont V Col (D) line 12)				
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.) ► Part IX Other Assets (See Form 990, Part X,	line 15) N/A			
, , , , , , , , , , , , , , , , , , , ,	escription			(b) Book value
	U			, ,
Total. Column (b) Total (should equal Form 990, Part X, col.				
Part X Other Liabilities (See Form 990, Part				
(a) Description of Liability	(b) Amount			
Federal Income Taxes				
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	•			
TOTAL TOTAL CONTROL OF THE PROPERTY OF THE PRO	- 1			

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.

Pai	rt XI	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Tota	l revenue (Form 990, Part VIII,column (A), line 12)		390,503.
2	Tota	l expenses (Form 990, Part IX, column (A), line 25)		489,712.
3	Exce	ess or (deficit) for the year. Subtract line 2 from line 1		-99,209.
4	Net ι	unrealized gains (losses) on investments		
5	Dona	ated services and use of facilities		
6	Inves	stment expenses.		
7	Prior	period adjustments		
8	Othe	r (Describe in Part XIV) See .Part . XIV		-98,622.
9	Tota	l adjustments (net). Add lines 4-8		-98,622.
10		ess or (deficit) for the year per financial statements. Combine lines 3 and 9		-197,831.
Pai	rt XII	Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	
1	Tota	I revenue, gains, and other support per audited financial statements	1	390,503.
2	Amo	unts included on line 1 but not on Form 990, Part VIII, line 12:		
á	a Net ι	unrealized gains on investments		
ŀ	b Dona	ated services and use of facilities		
(c Reco	overies of prior year grants		
(d Othe	r (Describe in Part XIV)		
•	e Add	lines 2a through 2d	2e	
3	Subt	ract line 2e from line 1	3	390,503.
4	Amo	unts included on Form 990, Part VIII, line 12, but not on line 1:		
ā	a Inves	stments expenses not included on Form 990, Part VIII, line 7b		
ŀ	b Othe	r (Describe in Part XIV)		
(c Add	lines 4a and 4b	4c	
5	Tota	I revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	390,503.
Pai	rt XIII	Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn	
1	Tota	l expenses and losses per audited financial statements	1	489,712.
2	Amo	unts included on line 1 but not on Form 990, Part IX, line 25:		
ā	a Dona	ated services and use of facilities		
ŀ	b Prior	year adjustments		
(c Loss	es reported on Form 990, Part IX, line 25		
(d Othe	r (Describe in Part XIV)		
•	e Add	lines 2a through 2d	2e	
3	Subt	ract line 2e from line 1	3	489,712.
4	Amo	unts included on Form 990, Part IX, line 25, but not on line 1:		
á	a Inves	stments expenses not included on Form 990, Part VIII, line 7b		
ŀ	b Othe	r (Describe in Part XIV)		
(c Add	lines 4a and 4b	4c	
		expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	489,712.
Pai	rt XI\	/ Supplemental Information		
Com	plete	/ Supplemental Information this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lit X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	nes 1b and	2b; Part V,

Schedule D (Form 990) 2008	Page 5
Schedule D (Form 990) 2008 Part XIV Supplemental Information (continued)	
	

2008

Schedule D, Part XIV - Supplemental Information

Page 6

Catching the Dream

85-0360858

Schedule D, Part XI, Line 8 Other Changes In Net Assets Or Fund Balances

Unrealized investment gains and losses, net $\frac{$-98,622}{$-98,622}$.

COPY

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No. 1545-0047

nen to Bublic

Department of the Treasury Internal Revenue Service

► Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.
► Attatch to Form 990.

Open to Public Inspection

Catching the Dream						85-036085	
Part I General Information on G	rants and Assis	tance				103 030003	
 Does the organization maintain record the selection criteria used to award th Describe in Part IV the organization's 	e grants or assistand procedures for moni	ce? itoring the use of gr	ant funds in the United S	states.			X Yes No
Part II Grants and Other Assista							
990, Part IV, line 21 for ar Part IV and Schedule I-1 (
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
			COP	4			
2 Enter total number of section 501(c)(3 3 Enter total number of other organization							

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
holarships	259	228,905.			
t IV Supplemental Information. C	 omplete this part to pro	ovide the informa	tion required in P	art I, line 2, and any oth	ner additional information.
			Ya		
		C)		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2008

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.

Open to Public Inspection

Catching the Dream	85-0360858
Explanation of Amended Return	
Organization was audited by independent accountant resulting	in audit adjustments to
the books of account, financial statements and Form 990	
Form 990, Part VI, Line 10 - Form 990 Review Process	
The return is prepared by an independent accounting firm. t	he completed return is
reviewed and approved by the Executive Director. After the E	xecutive Director
approval, it is then distributed to the voting members of th	e governing board and
filed with the IRS.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	e
The organization makes its governing documents, financial st	atements and other
policies available upon request.	
OK-7	
	

TEEA4901L 12/19/08