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 2008

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	2008 calendar year, or tax year beginning 5/05 , 2008, and endi	ng 12/3	31		, 2008	
В	Check if a	applicable;		D Employe	r Identii	fication Number	
	Addr	ess change Please use VISIONS GLOBAL EMPOWERMENT		26-3	386	678	
	Nam	e change or print or type. 1621 BARRY AVENUE # PH 1		E Telephon	ne numb	per	
	X Initia	See LOS ANGELES, CA 90025		(310) 8	67-9566	
	\vdash	Instruction tions.					
		nded return		G Gross re	ceints \$. 15.	222.
	\vdash	ication pending F Name and address of principal officer:	H(a) Is this	a group return	_		X No
		Same As C Above	H(b) Are all	affiliates inclu	ded?	Yes	No
$\overline{}$	Tay	exempt status X 501(c) (3) (insert no.) 4947(a)(1) or 527	If 'No,'	attach a list. ((see ins	tructions)	
<u>'</u>		site: > www.visionsforthefuture.org	H(2) Croup	exemption nur	mbar Þ		
_						egal domicile:	
K	irt I	f organization: Corporation Trust Association Other ► L Year of Forms Summary	mon: 2000	0 111 30	ale or is	egai domicile.	· · · · · · · · · · · · · · · · · · ·
31886	1 B	Briefly describe the organization's mission or most significant activities: <u>Visions</u>	micci	on is t	-0 3	eciet and	
		support disadvantaged and/or needy persons and commun					
Activities & Governance		scale, with a focus on developing nations, through ef					
rna		limited to education, development, health care, reli					
Ķ	2 0	Check this box if the organization discontinued its operations or disposed of mo	re than 25	% of its as:	sets.	. www. news	
ğ		lumber of voting members of the governing body (Part VI, line 1a)			3		3
တ္	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		<u>[</u>	4		0
/itte		otal number of employees (Part V, line 2a)			5		0
ŧ	1	otal number of volunteers (estimate if necessary)		-	6		0
⋖		otal gross unrelated business revenue from Part VIII, line 12, column (C)			7a		0.
	b N	let unrelated business taxable income from Form 990-T, line 34			7b		0.
				rior Year		Current Y	
Φ		Contributions and grants (Part VIII, line 1h)				15	,217.
enc		Program service revenue (Part VIII, line 2g).					
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)					5.
_	P	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				15	,222.
	 	otal revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)					, 444.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)					
	ı	Renefits paid to or for members (Part IX, column (A), line 4)			-		
S)	1	dalaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					-
Expenses	ı	rofessional fundraising fees (Part IX, column (A), line 11e)			******		
Ϋ́	I	otal fundraising expenses (Part IX, column (D), line 25) ►	-				
-		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		and the second s			,846.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)					,846.
		levenue less expenses. Subtract line 18 from line 12				2	,376.
Net Assets or Fund Balances			Begin	ning of Ye	ar	End of Ye	ar
alan	20 T	otal assets (Part X, line 16)			0.	2	,376.
t As	21 T	otal liabilities (Part X, line 26)			0.	<u> </u>	0.
žĮ	22 N	let assets or fund balances. Subtract line 21 from line 20			0.	2	376.
Pa	ra II	Signature Block					
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and s true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which pre	atements, and parer has any	d to the best o knowledge.	of my kn	nowledge and belief	, it is
Sig	n	▶	I				
He		Signature of officer	Dat	te			
		▶			*		
		Type or print name and title.					
_		Date	Ch	neck if	Pre	eparer's identifying e instructions)	number
Pa	id		se en	elf- nployed ► [ic monucions,	
Pre	9-	Preparer's Nanda Senathi, MS, CPA, CMA	31091	- L	— I	50-65-402	7
	rer's	Firm's name (or NANDA SENATHI, CPA, CMA				. **.	
Us		yours if self- employed), PO BOX 395	EI	N ► 95	5-41	09605	
On	ııy	address, and ZIP + 4 HERMOSA BEACH, CA 90254-0395	Ph	-	(310		25
May	v the IR	S discuss this return with the preparer shown above? (see instructions)				X Yes	No
	, 11 (1		·				

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Par	Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission:		
	See Schedule 0		
2	Did the organization undertake any significant program services during the year which were not listed on the	he 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 service	ces? 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 be 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.	y expenses. Section 501(c)(3) allocations to others, the total	
4a	a (Code:) (Expenses \$ 8,585. including grants of \$)	(Revenue \$)
	.Visions' current efforts are focused on Sri Lanka, Kenya and I		
	likely to expand elsewhere in the future. We aim to provide dis		
	people, teachers, and communities with strong education in engl leadership, life skills, human rights, health, and more. Of our	1sh, 11/computers,	
	indirectly implemented through local partner organizations on t	the ground 30% is	
	directly implemented by the Visions organization itself, and 10		
	raising and capacity building.		
			. ;
4b	o (Code:) (Expenses \$ including grants of \$)	(Revenue \$	
		· — — — — — — — — — — — — — — — — — — —	
		· · · · · · · · · · · · · · · · · · ·	
-	2000000000		
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
		, 	
Δd	Other program services. (Describe in Schedule O.)		
→u	(Expenses \$ including grants of \$) (Revenue	\$	
1.	Total program conjugative of \$ 8.585 (Must equal Part IV. Line 25 column (6)		

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		X
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
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? 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? If 'Yes,' complete Schedule D, Part II	7		Х
8		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? If 'Yes,' complete Schedule D, Part IV	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
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Χ
ŀ	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		Χ
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		Х
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		X
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		Х
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		X
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		V
	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		
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		Х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		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
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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:			
i	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		X
I	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		X
•	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		<u>X</u>
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? If 'Yes,' complete Schedule M	30		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		X
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		X
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		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	37		Х
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Part V Statements Regarding Other IRS Filings and Tax Compliance

		***************************************		T	T
1.	Enter the number reported in Pay 2 of form 1006. Applied Summers and Transmitted of LLC.	l I		Yes	No
14	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 0)		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b 0	4		
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	s and reportable gaming	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a 0)		
2b	${f p}$ If at least one is reported on line 2a, did the organization file all required federal employment	tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retu	rn. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the yea this return?		3a		Х
b	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		3b		
4 a	i At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other fir	or other authority over, a nancial account)?	4 a		Х
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 Financial Accounts.	oreign Bank and			
	. Was the organization a party to a prohibited tax shelter transaction at any time during the tax	2	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5b		Х
С	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp Prohibited Tax Shelter Transaction?	t Entity Regarding	5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		Х
b	olf 'Yes,' did the organization include with every solicitation an express statement that such condeductible?	ntributions or gifts were not	6b	·	
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution	of more than \$75?	7a		Χ
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?.		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wir Form 8282?	ich it was required to file	7 c		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premium benefit contract?	s on a personal	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	efit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as re		7 g		Χ
	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a F	•	7h		X
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and supporting organizations. Did the supporting organization, or a fund maintained by a sponsor excess business holdings at any time during the year?	section 509(a)(3)	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?		9a		*********
	Did the organization make any distribution to a donor, donor advisor, or related person?		9b		
	Section 501(c)(7) organizations. Enter:		3.5		
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь	1 1		
	Section 501(c)(12) organizations. Enter:	1			
	Gross income from other members or shareholders	11 a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		12a	····	100000000000
	· · · · · · · · · · · · · · · · · · ·	12b			

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

Se	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,		Yes	No
	processe	s, or changes in Schedule O. See instructions.			
1		number of voting members of the governing body	3		
	b Enter the	number of voting members that are independent	_		
2	Did any officer, d	officer, director, trustee, or key employee have a family relationship or a business relationship with any other irector, trustee or key employee?	2	Х	
3	Did the o	rganization delegate control over management duties customarily performed by or under the direct supervision s, directors or trustees, or key employees to a management company or other person?	3		Х
4		rganization make any significant changes to its organizational documents	4		X
		prior Form 990 was filed?			
5		rganization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the	organization have members or stockholders?	6		Χ
7	a Does the	organization have members, stockholders, or other persons who may elect one or more members of the global pody?	7a		Х
	b Are any	decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the o	rganization contemporaneously document the meetings held or written actions undertaken during the year by ving:			
	a The gove	rning body?	8a		Х
		nmittee with authority to act on behalf of the governing body?	8b		Х
9	a Does the	organization have local chapters, branches, or affiliates?	9a		X
	b If 'Yes,' o and bran	loes the organization have written policies and procedures governing the activities of such chapters, affiliates, ches to ensure their operations are consistent with those of the organization?	9b		
10	Was a co describe	py of the Form 990 provided to the organization's governing body before it was filed? All organizations must in Schedule 0 the process, if any, the organization uses to review the Form 990 See. Schedule0	10		Х
11	is there a	iny officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	11		Х
<u>Se</u>	ction B.	Policies			
<u>Se</u>	ction B.	Policies		Yes	No
		Policies organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Yes X	No
12	a Does the b Are office		12a 12b		No
12	a Does the b Are office to conflice	organization have a written conflict of interest policy? If 'No,' go to line 13		Χ	No
12	a Does the b Are office to conflic c Does the Schedule	organization have a written conflict of interest policy? If 'No,' go to line 13	12b	X	No
12	a Does the b Are office to conflic c Does the Schedule Does the	organization have a written conflict of interest policy? If 'No,' go to line 13. irs, 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 See Schedule.0.	12b 12c	X	
12	a Does the b Are office to conflic c Does the Schedule Does the	organization have a written conflict of interest policy? If 'No,' go to line 13. irs, 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 See . Schedule. O. organization have a written whistleblower policy?	12b 12c 13	X	X
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons,	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests that could give rise sers? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done See . Schedule. O organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess 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
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests that could give rise is? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done See Schedule. O. organization have a written whistleblower policy? organization have a written document retention and destruction policy?	12b 12c 13 14	X	XXX
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests that could give rise sers? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done See Schedule. O. organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official?	12b 12c 13 14	X	X X
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe a Did the of	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests that could give rise services? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done See . Schedule. O. organization have a written whistleblower policy? organization have a written document retention and destruction policy? orcess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official? cers of key employees of the organization?	12b 12c 13 14	X	X X
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orgal b Other offi Describe a Did the o entity dur b If 'Yes,' h in joint ve	organization have a written conflict of interest policy? If 'No,' go to line 13. Its, directors or trustees, and key employees required to disclose annually interests that could give rise is? 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 16a	X	X X X
12 13 14 15	a Does the b Are office to conflic c Does the Does the Does the Did the p persons, a The orgal b Other offi Describe a Did the o entity dur b If 'Yes,' h in joint ve status wit	organization have a written conflict of interest policy? If 'No,' go to line 13. Its, directors or trustees, and key employees required to disclose annually interests that could give rise is? 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 X
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe a Did the one entity dur b If 'Yes,' h in joint ve status wit ction C.	organization have a written conflict of interest policy? If 'No,' go to line 13. ors, directors or trustees, and key employees required to disclose annually interests that could give rise services? 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 16a	X	X X X
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Does the Does the Did the p persons, a The organ b Other offi Describe a Did the one entity dur b If 'Yes,' h in joint ve status wit ction C. List the si Section 6	organization have a written conflict of interest policy? If 'No,' go to line 13. Ars, directors or trustees, and key employees required to disclose annually interests that could give rise services. 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 16a	X	X X X
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe a Did the onentity dur b If 'Yes,' h in joint ve status wit ction C. List the s' Section 6 inspection	organization have a written conflict of interest policy? If 'No,' go to line 13. Ars, directors or trustees, and key employees required to disclose annually interests that could give rise services? Organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in O how this is done See . Schedule. 0. 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: Disciplication's CEO, Executive Director, or top management official? Cers of key employees of the organization? The process in Schedule O. (see instructions) The process in Schedule O. (see in	12b 12c 13 14 15a 15b 16a	X	X X X
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Part VIII 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.

X Check this box if the organization did no	t compens	sate ar	ту о	ffice	r, d	irecto	r, tru	ıstee, or key employe	e.	
(A)	(B)			(c)			(D)	(E)	(F)
Name and Title	Average hours		_		k all t	that app		Reportable compensation from	Reportable	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key	Highest compensated employee	Former	the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	compensation
		/idua	tutio	ě	Key employee)est o	ner	(11 27 1035 141100)	(11-2/1033-111130)	compensation compensation from the organization and related organizations
		or tra	nal t		loye	e				organizations
		stee	ruste		e	bensa				
			ň			ated				
MEERA PATHMARAJAH										
CEO	6			Х				0.	0.	0.
KRISTEN BUIE						İ				
CFO	3			Х		ļ		0.	0.	0.
KATHERINE SPLITEK				,,					_	_
Secretary	2			X		<u> </u>		0.	0.	0.
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Part VII Section A. Officers, Directors, Trus	tees, l	Key	Er	npl	oy	ees	, aı	nd Highest Co	mpensated En	nployees (cont.)
(A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week	<u> </u>		(check Officer		1		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations	Estimated amount of other compensation
		Individual trustee or director	tutional	ěř	Key employee	Highest con	ner	(W-2/1099-WISC)	(W-2/1099-MISC)	from the organization and related organizations
		ustee	Institutional trustee		/ee	compensated				
			, v			ed.				
									CO STANCES	

1 b Total							>	0.	0.	0.
2 Total number of individuals (including those in 1a) whorganization ► 0	no recei	ved .	mor	e th	an :	\$100	0,000	0 in reportable cor	npensation from th	l e
2 Did blooms in the list and former officers discovered	4 4						. 1	h 4		Yes No
 3 Did the organization list any former officer, director of on line 1a? If 'Yes,' complete Schedule J for such inc 4 For any individual listed on line 1a, is the sum of rep 	dividual.		· · · ·							з Х
the organization and related organizations greater th individual	an \$150	,000	? If	'Ye:	s' c	amo	lete	Schedule J for su	ch	4 X
5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Sche	mpensa edule J	tion for s	fror uch	n ar	ıy u son	nrela	ated	organization for s	services	5 X
Section B. Independent Contractors										
Complete this table for your five highest compensate compensation from the organization.	d indepe	ende	ent c	contr	act	ors f	that	received more that	n \$100,000 of	
(A) Name and business address	5							(B) Description o	f Services	(C) Compensation
										100000000000000000000000000000000000000
							_			·
2 Total number of independent contractors (including the	nose in	1) w	ho r	ecei	ived	mo	re ti	han \$100,000 in		
compensation from the organization ► 0										

Ra	ert VIII Statement of Revenue				1
		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
			exempt function	business revenue	excluded from tax under sections
	T		revenue	revende	512, 513, or 514
NTS	1a Federated campaigns 1a				
GRA	b Membership dues				
TS, RAIV	d Related organizations				
₹.	e Government grants (contributions) 1 e				
NOI:	• All other contributions gifts greats and				
EGT ET	f All other contributions, gifts, grants, and similar amounts not included above 1f 1	5,217.			
NDO	g Noncash contribns included in Ins 1a-1f: \$				
용론	h Total. Add lines 1a-1f				
NOE	Busine	ss Code			
ŒVE	2a				
CEF	b				
ERV	d				
A:M S	e				
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS	f All other program service revenue				
PR -	g Total. Add lines 2a-2f	•			
	3 Investment income (including dividends, interest	and	_		
	other similar amounts)		5.		
	5 Royalties	•			
		'ersonal			
	6a Gross Rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)	Other			
	7a Gross amount from sales of assets other than inventory.	Other			
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
ш	8a Gross income from fundraising events				
ENUE	(not including . \$				
REV	of contributions reported on line 1c). See Part IV, line 18				
OTHER REVEN	b Less: direct expenses b				
6	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities.				
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less; direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	b Less; cost of goods sold b				
	c Net income or (loss) from sales of inventory	Þ			
	Miscellaneous Revenue Busines	s Code			
	11a		***************************************		
	b				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8				
	10c, and 11e	15,222. 1 5,222.	5.	0.	0.

Part IX Statement of Functional Expenses

campaign and fundraising solicitation

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). **(D)** Fundraising (C) (A) Do not include amounts reported on lines Program service Total expenses Management and general expenses 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22..... Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16...... Compensation of current officers, directors, 0. trustees, and key employees..... 0. 0. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in 0 section 4958(c)(3)(B) 0 0. Other salaries and wages..... Pension plan contributions (include section 401(k) and section 403(b) employer Other employee benefits..... Payroll taxes..... Fees for services (non-employees)..... a Management...... e Prof fundraising svcs. See Part IV, In 17..... f Investment management fees..... **g** Other..... 12 Advertising and promotion............ 13 Office expenses..... 14 15 16 17 Travel..... Payments of travel or entertainment expenses for any federal, state, or local Conferences, conventions, and meetings 20 Interest Payments to affiliates..... 22 Depreciation, depletion, and amortization.... Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 a Programs and show expenses 8,585. 8,585. 1,582. b Travel 1,582 c Supplies 772 772. 700. 700 d Outside services e Printing 339. 339. f All other expenses..... 868 868 25 Total functional expenses. Add lines 1 through 24f. . 12,846. 8,585. 4,261 Joint Costs. Check here ► SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational

Form 990 (2008) BAA

Part X Balance Sheet

2 Savings and temporary cash investments 2 3 3 4 Accounts receivable, net 4 4 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 10 Notes and loans receiv				(A) Beginning of year			(B) End of ye	∍ar
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24 Unsecured notes and loans payable. 25 Other liabilities. Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. 29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, and equipment fund. 31 Paid-in or capital surplus, or land, building, and equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Retained earnings, endowment, accumulated income, or other funds. 32 2, 37 33 Total net assets or fund balances.	Ė	23					,,,,,	
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26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ► and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, and equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. O. 26 O. 26 D. 27 Zamanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Samanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Samanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Samanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Samanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Samanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 32 and complete lines 32 and complete lines 32 and complete lines 32 and complete lines 33 and 34.	ļ		, ,					
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32 Retained earnings, endowment, accumulated income, or other funds	- 1			,				
Retained earnings, endowment, accumulated income, or other funds	¥ I							
C 33 Total net assets or fund balances	Ā							
	Ē							
1 34 Total Habilities and het assets/fully balances				0.	34	************	2,	<u>,376.</u>
Part XI Financial Statements and Reporting	Ha	n XI	Financial Statements and Reporting					
1 Accounting method used to prepare the Form 990: X Cash Accrual Other								s No X
			· · · · · · · · · · · · · · · · · · ·			_		X
c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?			- · · · · · · · · · · · · · · · · · · ·					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single		a Asa	a result of a federal award, was the organization required to undergo an audit or aud	dits as set forth in the Si	ngle	_	_	$\frac{1}{x}$
b If 'Yes,' did the organization undergo the required audit or audits?		b If 'Y	es,' did the organization undergo the required audit or audits?			[

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2008

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number VISIONS GLOBAL EMPOWERMENT 26-3386678 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.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) X An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 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 describes the type of supporting organization and complete lines 11e through 11h. 11 Type II Type III — Functionally integrated 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 Type I, Type II or Type III supporting organization, Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No 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?.... 11 q (i) a family member of a person described in (i) above?..... 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above?..... 11 q (iii) Provide the following information about the organizations the organization supports (i) Name of Supported Organization (iv) Is the rganization in col.
(i) listed in your (v) Did you notify the organization in col. (i) of (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (vi) Is the organization in col. (i) organized in the U.S.? (vii) Amount of Support your support? (see instructions)) governing document? Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2008

VISIONS GLOBAL EMPOWERMENT Schedule A (Form 990 or 990-EZ) 2008 Page 2 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.')... 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 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 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) F 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 gain or loss form the sale of capital assets (Explain in Part IV.) 12 Gross receipts from related activities, etc. (see instructions)...... 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)...... 14 % 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f....... 15 % 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 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.	

1 7 a	a 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 or	organization
b 10%-facts-and-circumstances test — 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a,	
or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain	in in Part IV how the

	organization meets the facts-and-circ	umstances test.	The organization qu	annes as a publicly supp	orted organization
18	Private foundation. If the organization	did not check a b	ox on line, 13, 16a,	16b. 17a. or 17b. check	this box and see instructions

Page 3

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

(Complete only in	you checked	the box on	line 9 of Part I.)

<u>Sec</u>	tion A. Public Support							
	ndar year (or fiscal yr beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')					15,2	217.	15,217.
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							0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	-re-succion						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0.
6	Total. Add lines 1-5	0.	0.	0.	0.	15,2	217.	15,217.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.		0.	0.
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	0.	0.	0.	0.		0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.		0.	0.
	Public support (Subtract line						<u> </u>	<u> </u>
	7c from line 6.)							15,217.
Sec	tion B. Total Support							
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(h) 200E	(c) 2006	(d) 2007	(e) 200	8	(f) Total
Calc	idai yeai (oi iistai yi begiiiiiiig iii)		(b) 2005					ACTION OF THE PERSON OF THE PE
9	Amounts from line 6	0.	0.	0.	0.	15,2	217.	15,217.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form		The state of the s					ACTION OF THE PERSON OF THE PE
9 10 a b	Amounts from line 6		The state of the s				217.	15,217. 5.
9 10 a b	Amounts from line 6	0.	0.	0.	0.		217. 5.	15,217. 5.
9 10 a b	Amounts from line 6	0.	0.	0.	0.		217. 5.	15,217. 5. 0. 5.
9 10 a b c 11	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.)	0.	0.	0.	0.	15,2	5.	15,217. 5. 0. 5. 0. 15,222.
9 10 a b c 11	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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 i	0. 0.	0.	0.	0.	15, 2	5. 5.	15,217. 5. 0. 5. 0. 15,222.
9 10 a b c 11 12	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 i organization, check this box and	0. 0. s for the organizat	0.	0.	0.	15, 2	5. 5.	15,217. 5. 0. 5. 0. 15,222.
9 10 a b c 11 12 13 14 Sec:	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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 i	0. 0. s for the organizat stop here	0. 0. iion's first, second	0. 0. , third, fourth, or	0. 0. fifth tax year as a	15, 2	5. 5.	15,217. 5. 0. 5. 0. 15,222.
9 10 a b c 11 12 13 14 Sec:	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 i organization, check this box and tion C. Computation of Putiness.	0. 0. s for the organizat stop here	0. 0. ion's first, second Percentage (f) divided by line	0. 0. , third, fourth, or	0. 0. fifth tax year as a	15, 2	5. 5.	15,217. 5. 0. 5. 0. 15,222. X
9 10 a b c 11 12 13 14 Sec 15 16	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 i organization, check this box and tion C. Computation of Pu	o. s for the organizat stop here blic Support F 08 (line 8, column 2007 Schedule A, I	0. tion's first, second. Percentage (f) divided by line Part IV-A, line 27g	0. 0. third, fourth, or	0. 0. fifth tax year as a	15, 2	5. 5. 1(c)(3)	15,217. 5. 0. 5. 0. 15,222. X
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	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 i organization, check this box and tion C. Computation of Pu Public support percentage for 20. Public support percentage from 2 tion D. Computation of Inv	s for the organizat stop here	0. 0. ion's first, second Percentage (f) divided by line Part IV-A, line 27g me Percentage column (f) divided	, third, fourth, or 13, column (f)) by line 13, column	fifth tax year as a	15, 2	5. 5. 1(c)(3) 15 16	15,217. 5. 0. 5. 0. 15,222. X % %
9 10 a b c 11 12 13 14 15 16 Sec 17 18	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 i organization, check this box and tion C. Computation of Pupublic support percentage for 20. Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income Investment In	o. o. o. o. o. o. s for the organizate stop here	0. O. O. Original of the control	third, fourth, or	fifth tax year as a	15, 2	5. 5. 1(c)(3) 15 16	15,217. 5. 0. 5. 0. 15,222. X % % %
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	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 i organization, check this box and tion C. Computation of Pupublic support percentage for 20. Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2008. If the more than 33-1/3%, check this box	o. o. o. o. o. o. s for the organizat stop here. blic Support F 08 (line 8, column coor Schedule A, I) vestment Incor or 2008 (line 10c, com 2007 Schedule e organization did ox and stop here.	0. 0. 0. O. Percentage (f) divided by line Part IV-A, line 27g me Percentage column (f) divided e A, Part IV-A, line not check the boomer the organization of	third, fourth, or 13, column (f)) by line 13, column 27h con line 14, and qualifies as a pub	fifth tax year as a	15, 2 a section 50	5. 5. 1(c)(3) 15 16 17 18 , and l	15,217. 5. 0. 5. 0. 15,222. X % % ine 17 is not ►
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	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 i organization, check this box and tion C. Computation of Pupublic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2008. If the	o. o. o. o. s for the organizat stop here. blic Support F 08 (line 8, column 2007 Schedule A, I restment Incorpor 2008 (line 10c, com 2007 Schedule e organization did ox and stop here. e organization did e organization did e organization did e organization did	O. O. O. O. O. Percentage (f) divided by line Part IV-A, line 27c me Percentage column (f) divided e A, Part IV-A, line not check the boo The organization of	0. 0. 13, column (f)) by line 13, column (27h	fifth tax year as a	a section 50°	5. 5. 1(c)(3) 15 16 17 18 , and 1	15,217. 5. 0. 5. 0. 15,222. X % % ine 17 is not % and line 18

Schedule A	(Form	990 or 9	990-EZ)	2008	VISION	NS	GLOBAL	EMPOWE	RMENT		:	26-3386	5678	Р	age 4
Part IV	Supp	lemen	tal In	format	tion. Con	nple	ete this	part to p	rovide the	e explanatio r additional	n requi	red by F	Part II, I	ine 10;	\
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

2008

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Name of the organization

VISIONS GLOBAL EMPOWERMENT

Employer identification number 26-3386678

Form 990, Part III, Line 1 - Organization Mission
communities on an international scale, with a focus on developing nations, through
efforts_focused_on,_but_not_limited_to,_education,_development,_health_care,_relief,
professional assistance, and other related efforts.
Form 990, Part VI, Line 10 - Form 990 Review Process
No review was or will be conducted.
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts
. Yes, Visions Global Empowerment has a "Conflict of Interest Policy", which is
designed to help the directors and officers to identify situations that present
conflicts of interest and to provide the organization with a procedure that will
allow a transaction to be treated as valid and binding even though a director or
officer has or may have a conflict of interests with respect to the transaction. In
the policy it is stated that for any potential issue that may arise concerning a
conflict of interest (as legally enumerated in the full policy), the party or
parties concerned must notify the Board of Directors or President of the Board of
Directors. In the discussions that will likely ensue, the interested parties may not
participate, except to disclose facts, and may not vote. All directors and officers
are required to annually submit (confidentially) in writing any conflicts of
interest or potential conflicts of interest that may arise to the President of the
Board of Directors

2008	Federal Worksheets	Page 1
Client VISIONS	VISIONS GLOBAL EMPOWERMENT	26-3386678
10/28/09		 08:44PM
Reconciliation of Change	e in Net Assets	
Total Expenses	r the Year per Form 990	\$ 15,222. 12,846. 2,376.
Excess or Deficit fo	r the Year per Financial Statements	 2,376.

Form 990, Part IX, Line 24 Other Expenses

		(A)	(B) Program	(C) Management	(D)
		Total .	Services	& General	Fundraising
Bank charges		11.		11.	
Books and publications		24.		24.	
Copying		63.		63.	
Design services		150.		150.	
License and permits		25.		25.	
Meals		124.		124.	
Outside services		700.		700.	
Postage		278.		278.	
Printing		339.		339.	
Programs and show expenses		8,585.	8,585.		
Supplies		772.		772.	
Travel		1,582.		1,582.	
Trips	m 	193.		193.	
	Total \$	12,846.	\$ 8,585.	\$ 4,261.	\$ 0.