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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
' While
- <i>U</i> -FFT <i>V</i>
400 1
Open to Public
Offers in a group
htchartion

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

*EUU	1
Open to Publ	C

_	or the 2	107 calendar year, or tax year beginning $SEP~1,~200$	07 and er	iding AUG 31	<u>, 2008</u>	
B C	heck if pplicable	Please use IRS			D Employer i	dentification number
	Address change	print or CAMP PUH'TOK FOR BOYS AND GIR	RLS, INC	•	26-0	214249
	Name change	type Number and street (or P.O. hox if mail is not delivered to street	E Telephone	number		
7	Initial return	Specific 17433 BIG FALLS ROAD	,			329-6590
	Termin-	tinstruc- tions City or town, state or country, and ZIP + 4		· · · · · · · · · · · · · · · · · · ·	F Accounting met	thoof X Cash Accrual
	⊒ation]Amende]return				Other (specify)	>
	Applicat	on Section 501(c)(3) organizations and 4947(a)(1) nonexempt char	ritable trusts	H and I are not app		tion 527 organizations
	_ ponug	must attach a completed Schedule A (Form 990 or 990-EZ).		H(a) Is this a group r		
G W	Vebsite [.]	►WWW.CAMPPUHTOK.COM		H(b) If "Yes," enter nu	umber of affilia	tes > N/A
, <mark>J 0</mark>	rganiza	ion type (check only one) \triangleright \boxed{X} 501(c) (3) \blacktriangleleft (insert no) $$ 4947(a))(1) or 527	H(c) Are all affiliates		N/A Yes No
K C	heck he	e if the organization is not a 509(a)(3) supporting organization a	nd its gross	(If "No," attach a H(d) Is this a separat	i list) 'e return filed h	N/ 20 Or-
re	eceipts a	re normally not more than \$25,000. A return is not required, but if the orga	inization	ganization cove	red by a group	ruling? Yes X No
C	hooses t	o file a return, be sure to file a complete return		I Group Exemption	n Number 🕨	N/A
				M Check ►	if the organiza	tion is not required to attach
	oss rec	eipts. Add lines 6b, 8b, 9b, and 10b to line 12	88,156.	Sch B (Form 99	90, 990-EZ, or	990-PF)
	11	Revenue, Expenses, and Changes in Net Assets o	r Fund Bala	nces		
	1	Contributions, gifts, grants, and similar amounts received				
	а	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	16	1,248,0	91.	
	C	Indirect public support (not included on line 1a)	10			
	d	Government contributions (grants) (not included on line 1a)	1d			
	е	Total (add lines 1a through 1d) (cash \$1, 248, 091.	noncash \$) 18	1,248,091.
	2	Program service revenue including government fees and contracts (from	Part VII, line 93)		2	314,232.
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	
	5	Dividends and interest from securities	,	1	5	1,847.
	6 a	Gross rents SEE STATEMENT	$T 1 \underline{6a}$	102,9		
	b	Less rental expenses SEE STATEMENT	T 2 <u>6b</u>	25,5	46.	
	C	Net rental income or (loss) Subtract line 6b from line 6a	/ .	muna)	. 6c	77,354.
	7	Other investment income (describe ► Received)	vea c	19242013) 7	
	8 a	Gross amount from sales of assets other (A) Security		(B) Other		
<u> </u>			,943.8a			
	b		,098. 8b			
	C		<155.⊳8c			
	d	Net gain or (loss) Combine line 8c, columns (A) and (B) STM			<u>8d</u>	<155.
!	9	Special events and activities (attach schedule). If any amount is from ${f gam}$	i ng , check here	>		
	a	Gross revenue (not including \$ of contributions reported on I	line 1b) 9a	<u> </u>		
1	b	Less direct expenses other than fundraising expenses	<u>9b</u>	L		
t	C	Net income or (loss) from special events. Subtract line 9b from line 9a	ı	l - -	90	· · · · · · · · · · · · · · · · · · ·
	10 a	Gross sales of inventory, less returns and allowances	10a	/,1	43.	
	b	Less cost of goods sold STATEMENT 5	10b	4,8	35.	2 222
	C	Gross profit or (loss) from sales of inventory (attach schedule) Subtract II Other revenue (from Part VII, line 103)	ine 10b from lifte	TO STMT	4 100	2,308.
<u>j</u>	l ''		~	g H _a H 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11	1 (42 (77
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	^	co 27 7111	12	1,643,677.
ا ۾ ح	13	Program services (from line 44, column (B))	Ş	EF AT LONG	13	477,644.
OV Expenses	14	Management and general (from line 44, column (C))	7	PRACHE	14	164,208.
₽ ē	15	Fundraising (from line 44, column (D))	,	TPK alk callH = OGDEN	15	
.5	16	Payments to affiliates (attach schedule)		The same of the same of	16	641 052
ш	17	Total expenses. Add lines 16 and 44, column (A)			17	641,852.
	D	Excess or (deficit) for the year Subtract line 17 from line 12	**		18	1,001,825.
_	18		11		19	105,767.
_	19	Net assets or fund balances at beginning of year (from line 73, column (A)	"			. 1)
Net Assets E	19 20	Other changes in net assets or fund balances (attach explanation)	,,		20	
Net Assets	19 20 21	Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year Combine lines 18, 19, and 20			20	1,107,592.
_	19 20 21	Other changes in net assets or fund balances (attach explanation)		าร		
Assets	19 20 21 21 7-07	Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year Combine lines 18, 19, and 20	parate instruction 2		21	1,107,592.

CAMP PUH'TOK FOR BOYS AND GIRLS, INC. Page 2 Form 990 (2007) All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) Statement of Part II Functional Expenses and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (B) Program (C) Management Do not include amounts reported on line (D) Fundraising (A) Total 6b. 8b. 9b. 10b. or 16 of Part I. services and general 22a Grants paid from donor advised funds (attach schedule) If this amount includes foreign grants, check here 22b Other grants and allocations (attach schedule) 0 • noncash \$_ If this amount includes foreign grants, check here 23 Specific assistance to individuals (attach schedule) 23 24 Benefits paid to or for members (attach 24 schedule) 25a Compensation of current officers, directors, key 0. 25,000 50,000 25,000. employees, etc. listed in Part V-A 25a b Compensation of former officers, directors, key 0. 0 0 employees, etc. listed in Part V-B 25b c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 25c 26 Salaries and wages of employees not 231,175. 231,175 26 included on lines 25a, b, and c 27 Pension plan contributions not included on 27 lines 25a, b, and c 28 Employee benefits not included on lines 6,934. 624 6,310 25a · 27 28 6,438. 5,859. 579. 29 29 Payroll taxes 30 30 Professional fundraising fees 420 273. 147 31 Accounting fees 137. 73. 210. 32 32 Legal fees 2,492. 62,416. 59,924. 33 33 Supplies 8,108.5,271. 2,837. 34 34 Telephone 598. 322 920. 35 Postage and shipping 76,876. 8,515. 68,361 36 36 Occupancy 50,998. 33,149. 17,849 37 37 Equipment rental and maintenance 1,122. 729. 393. 38 38 Printing and publications $8,\overline{584}$ 13,206. 4,622 39 39 2,356. 824 1,532. 40 40 Conferences, conventions, and meetings 41 Interest 41 203. 203. 42 Depreciation, depletion, etc. (attach schedule) Other expenses not covered above (itemize): 43a 43b 43c 43d 43e 43f 130,470. 90,588. 39,882 SEE STATEMENT 43g 44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), 641,852. 164,208 477,644 0. carry these totals to lines 13-15) Joint Costs. Check ▶ ☐ If you are following SOP 98-2 Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? N/A N/A, (ii) the amount allocated to Program services \$ If "Yes," enter (i) the aggregate amount of these joint costs \$ ___ N/A (iii) the amount allocated to Management and general \$ and (iv) the amount allocated to Fundraising \$

723011 12-27-07 Form 990 (2007)

	O4-4	(D O : . A	!:
Day III I	Statement o	i Program Service Acco	INDUISIONANTS (See the instructions)
ront m	Otatonicit o	i i logialli oci tice Acco	mplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What	t is the organization's prin	nary exempt purpo	se? ► SEE STATEMENT 9	Program Service Expenses
clien	ts served, publications is:	sued, etc Discuss	pose achievements in a clear and concise manner. State the number of achievements that are not measurable. (Section 501(c)(3) and (4) sile trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a _	SEE STATEMEN	Т 8		
- - <u>-</u>	Grants and allocations	\$) If this amount includes foreign grants, check here ▶	477,644.
b _ -				<u></u>
- - (Grants and allocations	\$) If this amount includes foreign grants, check here ▶ □	
- - -	1			
d _	Grants and allocations	\$) If this amount includes foreign grants, check here	<u></u>
-				
	Grants and allocations	\$) If this amount includes foreign grants, check here	J
	Other program services (a	•		_
_	Grants and allocations	\$) If this amount includes foreign grants, check here	177 611
1	lotal of Program Service	Expenses (should	d equal line 44, column (B), Program services)	477,644. Form 990 (2007)

INC.

Part IV Balance Sheets (See the instructions.) (A) Note: Where required, attached schedules and amounts within the description column Beginning of year End of year should be for end-of-year amounts only. 105,767. 829,964. 45 45 Cash - non-interest-bearing 46 46 Savings and temporary cash investments 24,146. 47 a Accounts receivable 47a 24,146. 47b 47c Less: allowance for doubtful accounts 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48b 48c Grants receivable 49 49 50 a Receivables from current and former officers, directors, trustees, and 50a key employees b Receivables from other disqualified persons (as defined under section 50b 4958(f)(1)) and persons described in section 4958(c)(3)(B) 51a 51 a Other notes and loans receivable 51b b Less allowance for doubtful accounts 51c 52 52 inventories for sale or use 53 Prepaid expenses and deferred charges 53 54 a Investments · publicly-traded securities STMT 11▶ X Cost 249,633 0. 54a b Investments - other securities 54b 55 a Investments · land, buildings, and 55a equipment basis 55b 55c b Less: accumulated depreciation 56 Investments - other 4,052 57 a Land, buildings, and equipment: basis 57a 203 3,849. b Less accumulated depreciation STMT 10 57c 57h Other assets, including program-related investments 58 58 (describe ► 105,767. Total assets (must equal line 74). Add lines 45 through 58 59 59 Accounts payable and accrued expenses 60 61 61 Grants payable 62 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64a 64 a Tax-exempt bond liabilities 64b b Mortgages and other notes payable Other liabilities (describe 65 0 0. Total liabilities. Add lines 60 through 65 66 Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. Net Assets or Fund Balances 105,767. 142,407. 67 67 Unrestricted 965,185. 68 68 Temporarily restricted 69 Permanently restricted Organizations that do not follow SFAS 117, check here
and complete lines 70 through 74. 70 70 Capital stock, trust principal, or current funds 71 71 Paid-in or capital surplus, or land, building, and equipment fund 72 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 1,107,592. 1,107,592. 105,767 73 (Column (A) must equal line 19 and column (B) must equal line 21) 105,767 Total liabilities and net assets/fund balances. Add lines 66 and 73

Form **990** (2007)

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the Part IV-A instructions) Total revenue, gains, and other support per audited financial statements Amounts included on line a but not on Part I, line 12: Net unrealized gains on investments b1 b2 2 Donated services and use of facilities b3 3 Recoveries of prior year grants b4 4 Other (specify): Add lines b1 through b4 C Subtract line b from line a Amounts included on Part I, line 12, but not on line a: 1 Investment expenses not included on Part I, line 6b 2 Other (specify): d Add lines d1 and d2 Total revenue (Part I, line 12). Add lines c and d Part IV-B | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A Total expenses and losses per audited financial statements Amounts included on line a but not on Part I, line 17: b1 Donated services and use of facilities 1 b2 2 Prior year adjustments reported on Part I, line 20 b3 3 Losses reported on Part I, line 20 b4 4 Other (specify): b Add lines b1 through b4 C Subtract line b from line a d Amounts included on Part I, line 17, but not on line a: 1 Investment expenses not included on Part I, line 6b 2 Other (specify): Add lines d1 and d2

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	-0-)	compensation plans	(E) Expense account and other allowances
ALEXANDRA KOURSOURIS GROTE	TREASURER/DIR	ECTOR OF	OPERA	
218 N. CHARLES STREET #1408			0 000	_
BALTIMORE, MD 21201	40.00	50,000.	2,089.	0.
CHARLES NEMPHOS	SECRETARY			
5174 MOUNTAIN ROAD		_		
PASADENA, MD 21122	1.00	0.	0.	0.
HEATHER REBSTAD	BOARD MEMBER			
19103 TYSON ROAD			!	
WHITE HALL, MD 21161	1.00	0.	0.	0.
HENRY BAKER	BOARD MEMBER			
16916 WESLEY CHAPEL ROAD				
MONKTON, MD 21111	1.00	0.	0.	0.
LOUIS KOUSOURIS	PRESIDENT			
3 KAMPMAN COURT				
SPARKS, MD 21152	1.00	0.	0.	0.
ROBERT ELDREDGE	BOARD MEMBER	· · · · · · · · · · · · · · · · · · ·		
17127 BIG FALLS ROAD				
MONKTON, MD 21111	1.00	0.	0.	0.
	•			

Form 990 (2007)

Total expenses (Part I, line 17). Add lines c and d

	1 990 (20							AND GI			26-0214	<u> 249</u>		age 6
Pa	rt V-A	Current Of	ficers, Di	rectors,	Trust	ees, a	and Ke	y Employee	es (continu	ied)		,	Yes	No
75 a	Enter th	e total number o	of officers, o	directors, a	ind trust	tees pe	rmitted t	o vote on orgai	nızatıon bu	siness at board	_			
	meeting	ıs								▶	6			
h	Are any	officers, directo	rs. trustees	s, or kev em	nplovee	s listed	ın Form	990, Part V-A, o	or highest o	compensated emp	loyees			
_	listed in	Schedule A, Pa	rt I, or high	est compe	nsated	profess	ional and	d other indeper	ndent conti	actors listed in Sc	hedule A,			ĺ
						or busin	ess relat	ionships? If "Y		a statement that I			.,	ĺ
	the indi	viduals and expl	ains the rei	ationship(s	s)				5	SEE STATEM	ENT 12	75b	X	
C										ompensated empl				
										actors listed in Sc				İ
		ation? See the in							empt or tax	able, that are relat	led to the	750	1	x
	•						•					75c		
d		 attach a staten organization h 						in the instruction	лъ.			75d	1	х
								v Employee	s That F	Received Com	pensation		her	
	<u> </u>	Benefits (If	any former	officer, dire	ector, tr	ustee, c	or key em	nployee receive	ed compen	sation or other ber	efits (describe	d belo	ow) dui	
		the year, list th	at person b	pelow and	enter th	e amou	int of cor	npensation or o	other bene	fits in the appropri				
		/A ¹) Name and a	ddrace				(B) Loans and	Δάναπορο	(C) Compensation (if not paid,	(D) Contributions employee benefit		E) Expe	
		(A)	j ivallie allu a	1001622	NON	E		(b) Loans and	Advances	enter -0-)	plans & deferred compensation pla	, la		
										1				
											ļ			
	_							<u> </u>			 			
											<u> </u>			
										<u> </u>	<u> </u>		T	
Pa		Other Inform										······	Yes	No
76		_	-	e in its acti	ivities o	r metho	ds of co	nducting activi	ties? If "Ye	s," attach a detaile	ed			U
		ent of each chan	-									76	ļ	X
77		ny changes mad	-	-	-	ng doci	uments t	out not reported	d to the IR	57		77	ļ	
70 -		attach a confor					_£ @4_00	O au man		anyoned by this	turn?	70-	-	х
		-			-			or more durin	ıy ıne year	covered by this re	turn? N/A	78a 78b	 -	<u> </u>
		has it filed a ta						action durant	he veer? If	"Ves " attach a ct	,	780 79	 	x
79 80 a		·						-	-	"Yes," attach a sta on) through comm		 	 	<u> </u>
ou a		rship, governing										80a		Х
h		enter the name				N/A			oipi oig			770		
J		s ino name	. J Urge					and check wh	ether it is	exempt or	nonexempt			
81 a	Enter d	rect and indirect	t political ex	kpenditure:	s. (See I	line 81 i	nstructio	•		81a	0.			
b		organization file	•	•								81b		X
												Fore	<u> </u>	120071

Forn	990 (2007) CAMP PUH'TOK FOR BOYS AND GIRLS, INC. 26-02	14249		age 7
Pa	rt VI Other Information (continued)	····	Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantia	lly		
	less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this			
	amount as revenue in Part I or as an expense in Part II.			
	(See instructions in Part III.)			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	_83a	Х	
þ	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		
84 a		84a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
	tax deductible?	84b		
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	_85a	-	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a			
	waiver for proxy tax owed for the prior year.			
C	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A	-		
e	NT / 7			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A N/A N/A	—		
g	boes the organization elect to pay the section occoler tax on the amount on the section occoler.	85g	-	
h	that the second			
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the N/A	055		
	Tollowing tax your.	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A			
	77 / 7			
	Groot recording interested of this Fall basis and a state transfer			
87	OUT (O)(TE) Organization of Entert a close mounts in the contract of the contr			
b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	against amounts due of received from them)		1	
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	88a	1	Х
	If "Yes," complete Part iX At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of		†	
	section 512(b)(13)? If "Yes," complete Part XI	▶ 88b		X
80 2	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under:			
05 6).		
н	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	_		
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			1
	If "Yes," attach a statement explaining each transaction	89b		X
C			1	
•	sections 4912, 4955, and 4958).		
ď	Enter: Amount of tax on line 89c, above, reimbursed by the organization	D.		
	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		Х
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	891		Х
	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organizati	on,	1	
•	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	<u>L</u>	_X_
90 a	List the states with which a copy of this return is filed ►MD			
t	Number of employees employed in the pay period that includes March 12, 2007			16
91 a	The books are in care of ▶ ALEXANDRA KOURSOURIS GROTE Telephone no ▶ 410-	-329-6		
	Located at ► 17433 BIG FALLS ROAD, MONKTON, MD ZIP+4	≥ 2111	_	
t	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	j	Х
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts		1	<u> </u>
		Forn	n 990	(2007)

			FOR B	OYS AND C	IRLS	,]	INC.	26-0	0214249	
Parl	VI Other Information (co	ontinued)								Yes No
C	At any time during the calendar yea	ar, did the organ	ization mair	ntain an office out	side of th	he Un	rted States?		91c	X
	If "Yes," enter the name of the fore	ign country 🕨		N/A						
92	Section 4947(a)(1) nonexempt chai	ntable trusts film	g Form 990	in lieu of Form 10)41- Che	ck he		1	4	
	and enter the amount of tax-exemp						D	92	<u> </u>	<u>A</u>
Par	t VII Analysis of Income-	Producing A								
Note	: Enter gross amounts unless other	wise	Unrelat (A)	ted business income		(C)	ed by section 512, 513,	or 514	(E))
Indica	ated.		Business	(B) Amount	l E	xclu- sion	(D) Amount		Related or	•
	Program service revenue:	_	code	711100111		code			function	
а	SUMMER CAMP PROGR	AM				_			31	4,232.
b				<u>-</u>						
C										
d	· · · · · · · · · · · · · · · · · · ·			-				-		
e										
f N	Medicare/Medicaid payments			·						
g F	Fees and contracts from governme	nt agencies								
94 N	Membership dues and assessments	S								
95 li	nterest on savings and temporary cash	investments				7.4		047		
	Dividends and interest from securiti					14	1,	847.	······	
	Net rental income or (loss) from real	estate:								
ac	debt-financed property					1.0	77	254		
	not debt-financed property					16		354.		
	Net rental income or (loss) from per	sonal property								
	Other investment income									
100 (Gain or (loss) from sales of assets			1		<u></u>	_	.166	_	
	other than inventory					01		155.		
	Net income or (loss) from special ev					0.3		200		
	Gross profit or (loss) from sales of in	nventory				03		308.		
103 (Other revenue:									
а				 						
b						-				
C						\rightarrow				
đ					-	-				
е	(5) (5)	(E)			0.		Ω1	354.	31	4,232.
	Subtotal (add columns (B), (D), and	• ••			0.		01,	2240		5,586.
	Fotal (add line 104, columns (B), (D Line 105 plus line 1e, Part I, should		unt on line 1	12 Part I						3,300.
·	t VIII Relationship of Acti				vemnt	Dur	DOSAS (See the	inetricti	000)	
	·······									uon'e
Line	exempt purposes (other than by				ittibuteu ii	mport	antily to the accomp	iisiiiiieiit (n til o organizat	1011 3
93B					OS HE	T.PI	ED MATNTA	יד אד	HE DAY	TO DAY
750	OPERATIONS OF T									HERY,
	ARTS AND CRAFTS									
	CLIMBING, CANOE						AMPERS.			
Par	district the second sec							nstructio	ns)	
	(A)	(B)	T	(C)	0		(D)		(E	
	ne, address, and EIN of corporation, partnership, or disregarded entity	Percentage of ownership interes	st	Nature of activitie	S		Total incom	e	End-of ass	
	partitions, or disregarded strate	Ownership interes	%							513
	N/A		%							
			%			1				
		<u> </u>	%			-				
Par	t X Information Regardi	ng Transfer		ated with Pers	sonal E	3ene	fit Contracts	(See the	Instructions)
	Did the organization, during the year, re								Yes	X No
	Did the organization, during the year, p	-	-						Yes	X No
	te: If "Yes" to (b), file Form 8870 an									
									Forn	9 90 (2007)

annutties described in question 107 above?

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please
Sign
Here

Date

Date

ALEXANDRA KOUSOURIS GROTE, DIRECTOR OF OPERATIONS

Type or print name and title

Preparer's signature

Total Classification of the control of the c

Paid
Preparer's
Use Only
Use Only

Preparer's

Phone no ► (410) 581-0800

Preparer's SSN or PTIN (See Gen Inst X)

Form 990 (2007)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Employer identification number

OMB No 1545-0047

2007

	CAMP PUH'TOK FOR BO	YS AND	GIRLS, INC.		26 02142	249
Part I	Compensation of the Five Highest (See page 1 of the instructions List each one if the			Officers, Dire	ctors, and T	rustees
(a) Name and address of each employee paid more than \$50,000	ne are none, er	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE						
			n.			
over \$50,000	other employees paid	•	0			
Part II-A	Compensation of the Five Highest (See page 2 of the instructions List each one (whether the compensation is the compensation of the Five Highest (See page 2).				ional Servic	es
	(a) Name and address of each independent contractor	or paid more the	an \$50,000	(b) Type of s	service	(c) Compensation
NONE						
						· · · · · · · · · · · · · · · · · · ·
	others receiving over fessional services	•	0			
Part II-B	Compensation of the Five Highest (List each contractor who performed services other firms If there are none, enter "None" See page 2 of	r than professio	onal services, whether individu		ervices	
	(a) Name and address of each independent contractor	or paid more th	an \$50,000	(b) Type of	service	(c) Compensation
NONE -						
				,		
Total number of \$50,000 for oth	other contractors receiving over er services	>	0			

g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

Schedule A (Form 990 or 990-EZ) 2007

An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions)

Schedule A (Form 990 or 990-EZ) 2007

100.0000% 27g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) .0000% Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15. NONE 723131 12-27-07

Total support for section 509(a)(2) test. Enter amount on line 23, column (e)

361,449

If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50,

34 a Does the organization receive any financial aid or assistance from a governmental agency?

If you answered "Yes" to either 34a or b, please explain using an attached statement

1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

b Has the organization's right to such aid ever been revoked or suspended?

Private School Questionnaire (See page 9 of the instructions) (To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 29 29 instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, 30 30 and other written communications with the public dealing with student admissions, programs, and scholarships? 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a 32b b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student 32c admissions, programs, and scholarships? 32d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to 33a a Students' rights or privileges? 33b b Admissions policies? 33c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 33d 33e e Educational policies?

Schedule A (Form 990 or 990-EZ) 2007

33f

33g

33h

34a

34b

f Use of facilities?

g Athletic programs?h Other extracurricular activities?

A/I

		(To be completed ONLY by	an eligible organization that t	filed Form 5768)					
Che	eck ▶ a	if the organization belong	s to an affiliated group	Check 🕨	b 🗆	If you chec	ked "a" and "limited	control	provisions apply
			Lobbying Expendit				(a) Affiliated group totals)	(b) To be completed for all electing organizations
36 37	Total lob	bying expenditures to influence	a legislative body (direct lobb		·	36 37 38	N/A		
38 39		bying expenditures (add lines 36 empt purpose expenditures	anu 37)			39			
40		mpt purpose expenditures (add	lines 38 and 39)			40			
41	If the am Not over \$500,	g nontaxable amount Enter the a sount on line 40 is - 500,000 ,000 but not over \$1,000,000 50,000 but not over \$1,500,000	The lobbying nontaxable 20% of the amount on line 40 \$100,000 plus 15% of the ex \$175,000 plus 10% of the ex	le amount is - 0 ccess over \$500,000	ı	41			
42 43 44	Over \$17,0 Grassroo Subtract	20,000 but not over \$17,000,000 200,000 20ts nontaxable amount (enter 25 line 42 from line 36 Enter -0- if line 41 from line 38 Enter -0- if	line 42 is more than line 36	cess over \$1,500,000		42 43 44			
	Caution:	If there is an amount on eit	her line 43 or line 44, you	must file Form 4	720				

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

		Lobbying Exp	enditures During 4-Year A	veraging Period	N/A
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures					0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions)

N/A

Amount

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- ${f b}$ Paid staff or management (include compensation in expenses reported on lines ${f c}$ through ${f h}$)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above	, also attach a statement giving	a detailed description of	f the lobbying activities
11 163 10 0114 01 116 00046.	. aist allacii a stateilleitt aiviitu	a uctalicu ucscriptivii u	I LIIC IODDANIG GCHAINCS

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		[
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				0.

723151 12-27-07 Schedule A (Form 990 or 990-EZ) 2007

Schedu	le A (Form 990 or 990-EZ) 2007	CAMP PUH'TOK FO	R BOYS AND G		0214249 Pag
Parl				i Relationships With Noncha	ritable
				organization described in section	
					Yes N
•	(i) Cash				51a(i) X
	(ii) Other assets				a(ii) X
b	Other transactions				
	(i) Sales or exchanges of asset	ts with a noncharitable exempt orga	nization		b(i) X
	(ii) Purchases of assets from a	noncharitable exempt organization			b(ii) X
İ	(iii) Rental of facilities, equipme	nt, or other assets			b(iii) X
	(IV) Reimbursement arrangeme	nts			b(iv) 3
	(v) Loans or loan guarantees				b(v) 3
	• •				b(vi) 2
				shape choughe fair market value of the	<u> </u>
ū	if the answer to any of the above	e is Yes, complete the following sci aiven by the reporting organization	If the organization received	liess than fair market value in any	
					N/A
(a)			3.2.3,	(d)	-
Line n		Name of noncharitable ex	empt organization	Description of transfers, transactions, a	nd sharing arrangement
		con Regarding Transfers To and Transactions and Organizations (See page 14 of the instructions) Inization directly or indirectly engage in any of the following with any other other than section 501(c)(3) organizations) or in section 527, relating to politically organization to a noncharitable exempt organization of ess of assets with a noncharitable exempt organization ests from a noncharitable exempt organization ests from a noncharitable exempt organization ests from a noncharitable exempt organization ests from a noncharitable exempt organization ests from a noncharitable exempt organization ests arrangement, or other assets ervices or membership or fundraising solicitations equipment, mailing lists, other assets, or paid employees if the above is "Yes," complete the following schedule. Column (b) should all or services given by the reporting organization. If the organization received narrangement, show in column (d) the value of the goods, other assets, or leved. Name of noncharitable exempt organization. Name of noncharitable exempt organization. Name of noncharitable exempt organization. Provided Name of noncharitable exempt organization. Name of noncharitable exempt organization.		· · · · · · · · · · · · · · · · · · ·	
			o and Transactions and Relationships With Noncha the instructions) any of the following with any other organization described in section ins) or in section 527, relating to political organizations? exempt organization of put organization solicitations r paid employees wing schedule Column (b) should always show the fair market value of the instation if the organization received less than fair market value in any value of the goods, other assets, or services received (c) table exempt organization Description of transfers, transactions, and instance in the inst		
					
		n Regarding Transfers To and Transactions and Relationships With Nonganizations (See page 14 of the instructions) atton directly or indirectly engage in any of the following with any other organization described in section rethan section 501(c)(3) organizations) or in section 527, relating to political organizations? thing organization to a noncharitable exempt organization of assets with a noncharitable exempt organization (from a noncharitable exempt organization quipment, or other assets ingerments inces or membership or fundraising solicitations priess or services or profits organization (b) should always show the fair market value of teverices given by the reporting organization if the organization received less than fair market value in any rangement, show in column (d) the value of the goods, other assets, or services received (d) Mame of noncharitable exempt organization Description of transfers, transaction (d) Name of noncharitable exempt organization (d) Description of transfers, transaction (d) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f			
		mpt Organizations (See page 14 of the instructions) ing organization directly or indirectly engage in any of the following with any other organization. Code (other than section 501(c)(3) organizations) or in section 527, relating to political organ in the reporting organization to a noncharitable exempt organization of ets. ets. ions exchanges of assets with a noncharitable exempt organization is of assets from a noncharitable exempt organization facilities, equipment, or other assets. ional guarantees ince of services or membership or fundraising solicitations interest equipment, mailing lists, other assets, or paid employees to any of the above is "Yes," complete the following schedule. Column (b) should always show assets, or services given by the reporting organization if the organization received less than isharing arrangement, show in column (d) the value of the goods, other assets, or services in the involved. (b) (c) Name of noncharitable exempt organization. Descript in involved. Name of noncharitable exempt organization. Descript attent directly or indirectly affiliated with, or related to, one or more tax-exempt organizations in section 501(c)(3)) or in section 527? lete the following schedule. (a) (b)			
			Ing Transfers To and Transactions and Relationships With Noncharitans (See page 14 of the instructions) In indirectly engage in any of the following with any other organization described in section 501(c)(3) organizations) or in section 527, relating to political organizations? on to a noncharitable exempt organization of an anoncharitable exempt organization antiable exempt organization antiable exempt organization wither assets. In the assets or paid employees seempt organization (b) should always show the fair market value of the by the reporting organization if the organization received less than fair market value in any low in column (d) the value of the goods, other assets, or services received (c) Name of noncharitable exempt organization Description of transfers, transactions, and sfort in section 527? In affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the in section 527? In affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the in section 527? In affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the insection 527? In affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the insection 527?	-	
		Exempt Organizations (See page 14 of the instructions) the reporting organization directly or indirectly engage in any of the following with any other organization described (o) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? siters from the reporting organization to a noncharitable exempt organization of Cash Other assets or assets with a noncharitable exempt organization Purchases of assets with a noncharitable exempt organization Purchases of assets from a noncharitable exempt organization Purchases of assets from a noncharitable exempt organization Rental of facilities, equipment, or other assets Reimbursement arrangements Loans or loan guarantees Performance of services or membership or fundraising solicitations ring of facilities, equipment, mailing lists, other assets, or paid employees e answer to any of the above is "vs." complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization if the organization received less than fair market value of the goods, other assets, or services received (b) Amount involved Name of noncharitable exempt organization Description of transference or more tax-exempt organizations described in the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the organization directly organizations described in the organization organization directly organizations desc			
	-	·			
-					
	Code (other than section 501(c)	(3)) or in section 527?	one or more tax-exempt org	anizations described in section 501(c) of t	he Yes X N
				(c)	
	Name of org	ganization	Type of organization	Description of relation	onsnip
			 		
	-				
	<u>.</u>				
				1	
		Information Regarding Transfers To and Transactions and Relationshie Exempt Organizations (See page 14 of the instructions) reporting organization directly or indirectly engage in any of the following with any other organization describe the Golde (other than section 501(c)(3) organizations) or in section 527, relating to political organizations is from the reporting organization to a noncharitable exempt organization of single erassets ansactions set or exchanges of assets with a noncharitable exempt organization relates of assets from a noncharitable exempt organization relates of assets from a noncharitable exempt organization relates of assets from a noncharitable exempt organization related to an understand of a facilities, equipment, or other assets moursement arrangements into organization received less than fair marking organization and organization received less than fair marking organization or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved Name of noncharitable exempt organization Description of tribusing organization organization of the column (d) the value of the goods, other assets, or services received (lo) Amount involved Name of noncharitable exempt organization of the programization of the column (d) the value of the goods, other assets, or services received (lo) and the column (d) the value of the goods, other assets, or services received (lo) arganization of the column (d) the value of the goods, other assets, or services received (lo) arganization of the column (d) the value of the goods, other assets, or services received (lo) arganization of the column (d) the value of the goods, other assets, or services received (lo) arganization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations describing the relation of the column (d) the value of the goods, other assets, or services received (lo) arganization received (lo) arganization received (lo) arganization received (lo) arganizati			
	······································				
			<u> </u>		
	<u> </u>]	<u>L</u>	

Current Year Deduction	203.
Current Sec 179	• •
Accumulated Depreciation	· •
Basis For Depreciation	4,052.
Reduction in Basis	o o
Bus % Excl	
Unadjusted Cost Or Basis	4,052, 4,052,
S S	## 65
Life	15.0019H
Method	092807150DB
Date Acquired	2807
Ac Ac	8 H H월
Description	MANAGEMENT AND GENERAL 2HOT WATER HEATER * 990 PAGE 2 TOTAL * GRAND TOTAL 990 PAGE 2 DEPR 2 DEPR
Asset	74

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990	1E		STATEMENT	1	
KIND AND LOCATION OF PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INC	OME
RENTAL OF CAMP FACILITIES; 174 MONKTON, MD	33 BIG FALLS	ROAD,	1	102,9	00.
TOTAL TO FORM 990, PART I, LIN	IE 6A			102,9	00.
FORM 990	RENTAL EXPE	NSES		STATEMENT	2
DESCRIPTION		TIVITY JMBER AM	10UNT	TOTAL	
RENTAL EXPENSES - SU	JBTOTAL -	1	25,546.	25,5	46.
TOTAL TO FORM 990, PART I, LIN	NE 6B			25,5	46.
FORM 990 GAIN (LOSS) FR	ROM PUBLICLY	TRADED SECUR	TIES	STATEMENT	3
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE		
SALE OF VARIOUS STOCKS FROM PNC	13,943.	14,098	. 0	. <1	55.
TO FORM 990, PART I, LINE 8	13,943.	14,098	. 0	. <1	55.

FORM 990	INCOME AND COST OF GOODS SO INCLUDED ON PART I, LINE 1		STATEMENT 4
INCOME			
2. RETURNS AND A	S	7,143	7,143
	SOLD (LINE 13) (LINE 3 LESS LINE 4)	4,835	2,308
7. MERCHANDISE P 8. COST OF LABOR 9. MATERIALS AND 10. OTHER COSTS	BEGINNING OF YEAR	0 2,616 1,500 719	4,835
	END OF YEAR	0	4,835

FORM 990	COST OF GOODS	SOLD - OTHER	COSTS	STATEMENT	5
DESCRIPTION				AMOUNT	
UTILITIES			•	7:	9.
TOTAL INCLUDED ON FORM 9	990, PART I, I	INE 10B		7:	19.
FORM 990	SALES OF IN	IVENTORY		STATEMENT	6
DESCRIPTION OF SALES CAT	TEGORY	GROSS SALES	cogs	NET SALES	5
THE CAMP HAS A "TRADING WHERE THE CAMPERS MAY PULIGHT SNACKS, BEVERAGES SOUVENIRS WHILE ATTENDING THE LIMIT PER CAMPER IS	JRCHASE AND NG CAMP.	7,143.	2,616.	4,52	7.
TOTAL AMOUNTS		7,143.	2,616.	4,52	7.
FORM 990	ОТН	ER EXPENSES		STATEMENT	7
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISI	NG
	41,466.	31,851.	9,615.		
LICENSES & FEES INSURANCE ADVERTISING GROUNDSKEEPING & OUTDOOR EXPENSES COMPUTER EXPENSES	3,358. 26,424. 41,740. 14,129. 1,294.	2,183. 17,176. 27,131. 11,406. 841.	1,175. 9,248. 14,609. 2,723. 453.		
ADVERTISING GROUNDSKEEPING & OUTDOOR EXPENSES	3,358. 26,424. 41,740.	2,183. 17,176. 27,131.	9,248. 14,609. 2,723.		

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT

DESCRIPTION OF PROGRAM SERVICE ONE

TO FACILITATE A SUMMER CAMP PROGRAM FOR CHILDREN THAT ALLOWS THEM TO TAKE PART IN ACTIVITIES THAT EMPHASIZE LEADERSHIP, TEAMWORK, SPIRITUALITY, APPRECIATION OF NATURE, AND DISCOVERING OUR AMERICAN HERITAGE. THE ONE-WEEK DAY CAMP PROGRAM IS FOR CHILDREN AGES 5-9. THE RESIDENTIAL CAMP PROGRAM OFFERS A ONE WEEK OR TWO WEEK SLEEP-AWAY CAMP FOR CHILDREN AGES 7-16.

			GRANTS	EXPENSES
TO FORM 99	O, PART III,	LINE A		477,644.
FORM 990	STATEMENT C	F ORGANIZATION'S F	PRIMARY EXEMPT PURPOS I	SE STATEMENT 9

EXPLANATION

TO CONTINUE THE OPERATION OF AN EDUCATIONAL OUTDOOR CAMP FOR BOYS AND GIRLS WITH PROGRAMS DESIGNED TO DEVELOP AN APPRECIATION FOR NATURE, OTHER PEOPLE AND THEMSELVES, THROUGH SERVICE LEARNING OPPORTUNITIES, SPIRITUAL MEDITATION, INDEPENDENT CHALLENGES AND OUTDOOR EXPLORATION.

FORM 990 DEPREC	CIATION OF	ASSET	S NOT	HELD	FOR	INVESTMENT	STATEMENT	10
DESCRIPTION			COS OTHER	T OR BASI	S	ACCUMULATED DEPRECIATION	BOOK VALU	JE
HOT WATER HEATER		_		4,0	52.	203.	3,8	349.
TOTAL TO FORM 990, P	ART IV, I	-N 57 -N 57 -		4,0	52.	203.	3,8	349.

FORM 990	NON-GOVERNMENT S	ECURITIES		STATEMENT	11
SECURITY DESCRIPTION COST	CORPORATE F/FMV STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV SECURITI	_
PNC INVESTMENTS CO	OST		249,633.	249,6	33.
TO FORM 990, LINE 54A, CO	DL B		249,633.	249,6	33.

12

FORM 990

EXPLANATION OF RELATIONSHIP PART V-A, LINE 75B

STATEMENT

INDIVIDUAL'S NAME

TITLE OR ROLE

LOUIS KOUSOURIS

PRESIDENT

INDIVIDUAL'S NAME

TITLE OR ROLE

ALEXANDRA KOUSOURIS GROTE

TREASURER AND DIRECTOR OF OPERATIONS

EXPLANATION OF RELATIONSHIP

LOUIS KOUSOURIS IS ALEXANDRA KOUSOURIS GROTE'S FATHER.

13

SCHEDULE A

EXPLANATION OF TRANSACTIONS PART III, LINE 2A

STATEMENT

CAMP PUH'TOK FOR BOYS AND GIRLS, INC. LEASES THE PROPERTY ON WHICH THE CAMP OPERATES FROM IN THE PINES, LLC. THIS LLC IS OWNED BY LOUIS KOUSOURIS, THE PRESIDENT OF THE BOARD FOR THE CAMP.

SCHEDULE A

EXPLANATION OF TRANSACTIONS PART III, LINE 2D

STATEMENT

14

ALEXANDRA KOUSOURIS GROTE, THE CAMP'S TREASURER AND DIRECTOR OF OPERATIONS, RECEIVES AN ANNUAL SALARY.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 15 PART III, LINE 3A

CAMP PUH'TOK FOR BOYS AND GIRLS INC. PROVIDES ASSISTANCE FOR INDIVIDUALS IN NEED TO ATTEND THE SUMMER CAMP PROGRAM. THIS ASSISTANCE IS PROVIDED IN THE FORM OF A SCHOLARSHIP BASED ON AN APPLICATION AND FINANCIAL NEED. THE SCHOLARSHIP APPLIES TO BOTH RESIDENTIAL AND DAY CAMP PROGRAMS.

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

► See separate instructions.

Business or activity to which this form relates

990

Identifying number

CAN	AP PUH'TOK FOR BOYS	AND GIRL	s, INC	. FOR	м 990	PAGE 2			26-0214249
Pa	Election To Expense Certain Prope	rty Under Section 1	79 Note. If yo	ou have any list	ted property	r, complete Par	t V be	fore yo	ou complete Part I.
1 N	Maximum amount. See the instructions	s for a higher limit	for certain b	usinesses				1	125,000.
2 1	otal cost of section 179 property place	ed in service (see	instructions	s)				2	
3 1	Threshold cost of section 179 property	before reduction	ın lımıtatıon					3	500,000.
	, , ,	tion To Expense Certain Property Under Section 179 Note. If you have any listed property, imount. See the instructions for a higher limit for certain businesses of section 179 property placed in service (see instructions) costs of section 179 property before reduction in limitation in limitation. Subtract line 3 from line 2. If zero or less, enter -0-in to tax year: Subtract line 3 from line 2. If zero or less, enter -0-in to tax year: Subtract line 4 from line 1. If zero or less, enter -0-in to tax year: Subtract line 4 from line 1. If zero or less, enter -0-in to tax year: Subtract line 4 from line 1. If zero or less, enter -0-in to tax year: Subtract line 4 from line 1. If zero or less, enter -0-in the tax year: Subtract line 4 from line 2. If zero or less, enter -0-in the tax year: Subtract line 4 from line 5 or line 8 for disallowed deduction from line 13 of your 2006 Form 4562 comme limitation. Enter the smaller of line 5 or line 8 for disallowed deduction. Add lines 9 and 10, but do not enter more than line 11 for substance in the substa				4			
5 c	Pollar limitation for tax year Subtract line 4 from line	The property is a service (see instructions) and instructions of a higher limit for certain businesses and cost of section 179 property before reduction in limitation and a service (see instructions) and initiation. Subtract line 3 from line 2. If zero or less, enter -0- and initiation for tax year. Subtract line 3 from line 2. If zero or less, enter -0- and initiation for tax year. Subtract line 4 from line 1 if zero or less, enter -0- in mand filing separately, see instructions (a) Description of property (b) Cost (Business use only) (c) Elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 179 property. Add amounts in column (c), lines 6 and 7 and selected cost of section 180 and 10, but do not enter more than line 1 and 11 and 11 and 11 and 11 and 12 and 11 an			5				
6						(c) Elected	d cost		
7 L	sted property. Enter the amount from	n line 29			7				
	• • •		s in column (c), lines 6 and	7	•		8	
		•	·					9	
10 (Darryover of disallowed deduction from	n line 13 of your 2	006 Form 45	562				10	
	•				o) or line 5			11	
12 5	Section 179 expense deduction. Add l	ines 9 and 10, but	do not ente	er more than lin	ie 11			12	
13 (Darryover of disallowed deduction to 2	2008. Add lines 9 a	and 10, less	line 12	▶ 13				
Note	: Do not use Part II or Part III below fo	r listed property	nstead, use	Part V					
Pa	rt II Special Depreciation Allowa	ance and Other D	epreciation	(Do not include	de listed pro	perty.)			
14 5	Special depreciation allowance for qua	alified property (ot	ner than liste	ed property) pla	aced in serv	ice during			
t	he tax year							14	
15 F	Election To Expense Certain Property Under Section 179 Note. If you have any listed property, complete Part Visionamum amount. See the instructions for a higher limit for certain businesses obtained to the section 179 property placed in service (see instructions) intended to set of section 179 property placed in service (see instructions) intended to set of section 179 property before reduction in limitation during the section 179 property before reduction in limitation eduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-limitation for tax year. Subtract line 4 from line 12 set or less, enter -0. Illustration for tax years Subtract line 4 from line 12 set or less, enter -0. Illustration for tax years substance (see Description of property (see Description of property). Add amounts in column (c), lines 6 and 7 intended in the smaller of line 5 or line 8 arryover of disallowed deduction from line 13 of your 2006 Form 4562 usiness income limitation. Enter the smaller of line 5 or line 8 arryover of disallowed deduction from line 13 of your 2006 Form 4562 usiness income limitation. Enter the smaller of line 5 or line 8 arryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 13 arryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 13 arryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 13 arryover of disallowed deduction for line 13 of your 2006 Form 4562 usiness income limitation. Briter the smaller of line 5 or lines 12 lines 12 lines 14 lines 14 lines 14 lines 14 lines 15 lines 14 lines 15 lines 15 lines 15 lines 15 lines 15 lines 15 lines 15 lines 15 lines 16 lines 15 lines 16 lines 15 lines 16 lines 15 lines 16 lines 16 lines 16 lines 16 lines 17 lines 16 lines 16 lines 17 lines 16 lines 16 lines 16 lines 17 lines 17 lines 16 lines 16 lines 17 lines 17 lines 19 lines 17 lines 19 lines 17 lines 19 lines 17 lines 19 lines 17 lines 19 lines 18 lines 17 lines 18 lines 17 lines 18 lines 17 lines 19 lines 18 lines 17 lines 19 lin			15	·				
16 (Other depreciation (including ACRS)							16	
Pa	First								
			S	ection A					
17	MACRS deductions for assets placed	ın service in tax ye	ears beginni	ng before 2007	7	_		17	······································
<u>18 j</u>									
	Section B - Assets	s Placed in Service			Jsing the G	eneral Deprec	iation	Syste	em
	(a) Classification of property	year placed	(business/i	nvestment use		(e) Convention	on (f) M	lethod	(g) Depreciation deduction
<u>19a</u>	3-year property						4		
b	5-year property	_							
c	7-year property				•		_		
d	10-year property								
е_	15-year property			4,052.	15 YR	S. HY	15	0DB	203.
f_	20-year property								
9_	25-year property				25 yrs.			S/L	
h	Residential rental property	/			27 5 yrs	. MM		5/L	
	nesidential terrial property	/			27 5 yrs	MM		S/L	
i	Nonresidential real property	/			39 yrs.	MM		S/L	
		/							
	Section C - Assets I	Placed in Service	During 200	7 Tax Year Us	sing the Alt	ernative Depre			tem
<u>20a</u>	Class life	_							
<u> </u>									
C		/			40 yrs.	MM		3/L	
									
	. , .							21	
		=							202
	, , ,		-		tions - <u>see ir</u>	nstr.		22	203.
	· ·		e current ye	ar, enter the					
71627 04-29						<u> </u>			E. 4500 EM (0002)
04-20	Ins LHA For Paperwork Reduction	n Act Notice, see	separate in	istructions.					Form 4562-FY (2007)

Form 4562-FY (2007) 26-0214249 CAMP PUH'TOK FOR BOYS AND GIRLS, INC. Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

24	a Do you have evidence to s	support the bu	siness/investment	use claimed?	_ Yes	No	24b If "Y	es,* is the	evider	nce writter	17	Yes	N
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	Basis for de (business/ir use c	preciation extrement	(f) Recovery period	(g) Metho Conven		(h) Deprecia deducti		(i Elec sectio co	cted
25	Special depreciation alle	owance for q	ualified listed pr	operty placed in s	ervice dur	ing the t	ax year an	d					
	used more than 50% in	a qualified b	usiness use						25			<u></u>	
26	Property used more tha	ın 50% ın a c	ualified busines	s use									
	_		%										
	_		%										
			%									<u> </u>	
7	Property used 50% or le	ess in a qual	fied business us	e	·								
			%					S/L -					
			%					S/L·				İ	
			%					S/L·					
28	Add amounts in column	(h), lines 25	through 27. Ent	er here and on line	e 21, page	1			28			<u> </u>	
20	Add amounts in column		=								29		

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for

(d) **(f)** (a) (b) (c) (e) Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 Yes Yes 34 Was the vehicle available for personal use Yes No No No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

3/	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	162	140
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization										
(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or percen		(f) Amortization for this year				
42 Amortization of costs that begins during your 2007 tax year:										
	<u> </u>									
43 Amortization of costs that began before your 2007 tax year										
44 Total. Add amounts in column (f). See the instructions for where to report										

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those vehicles.

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