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Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

			<u> </u>									
•	A F	or the	2008 calendar year, or tax year beginning JUL 1, 2008 and ending	JUN 30, 20	009							
	Вс	heck of	D Employer ide	entification number								
	a	pplicable	Please Use IRS Use IRS Iabel or C1 1 1 1 1 1 1 1 1									
		Addres: change										
		Name change	9-2790823									
		Initial	See Number and street (or P.O. box if mail is not delivered to street address) Room/su									
		Termin-	Specific 115 North 12th Ctroot		52-314-8733							
		⊒ation ∏Amende		G Gross receipts \$	2,693,625.							
	-	⊸lreturn ∏Applica		H(a) Is this a gro								
	_	Ition pending		for affiliates								
			same as C above		es included? Yes No							
	I Tax-exempt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527 If "No," attach a list. J Website: ▶ www.christiancarecenter.org H(c) Group exemption nu											
			Summary	ar of formation. 196	35 M State of legal domicile: FL							
	Г		· · · · · · · · · · · · · · · · · · ·	og and Chal	towa							
10	ce	1 E	Briefly describe the organization's mission or most significant activities. Counseli	ig and sher	.cers							
2010	Governance	-		050/ / .								
	ler.	l	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its a								
ර දැ	်	l	Number of voting members of the governing body (Part VI, line 1a)		3 9							
	•ర	l	Number of independent voting members of the governing body (Part VI, line 1b)	•	4 9							
APR	ies	l	otal number of employees (Part V, line 2a)		5 179							
7	iķ	l	otal number of volunteers (estimate if necessary)		6 150							
\Box	Activities	7a ⊺	otal gross unrelated business revenue from Part VIII, line 12, column (C)		7a 0.							
Щ		b N	Net unrelated business taxable income from Form 990-T, line 34		7b 0.							
SCANNED				Prior Year	Current Year							
A	Pe	8 0	Contributions and grants (Part VIII, line 1h)	1,982,01								
Q	Revenue	9 F	Program service revenue (Part VIII, line 2g)	15,60								
Ω	ev.	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	3,63								
	-	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	179,82								
		12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,181,08	<u>2,560,930.</u>							
		13 6	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,175,50	<u>151,270.</u>							
		14 E	Benefits paid to or for members (Part IX, column (A), line 4)									
	S	15 S	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	727,88	32. <u>1,477,675.</u>							
	nse	16a F	Professional fundraising fees (Part IX, column (A), line 11e)									
	Expenses	ьf	otal fundaising-expenses (Part IX, column (D), line 25)									
	ũ		Other expenses (ParVIX, dolumn (A), lines 11a-11d, 11f-24f)	539,35	818,937.							
			gtal expenses Add lines 13-17 must equal Part IX, column (A), line 25)	2,442,73								
		19	Wernue/less Respenses Subtract Ine 18 from line 12	<261,65								
	or		[6]	Beginning of Yea								
	sets	20	otal assets Rad X lines 167	2,041,94								
	ASS	21	otal habitibe (Partx, line 26)	100,45								
	Net Assets or Fund Balances	22 N	Net assets or fund balances. Subtract line 21 from line 20	1,941,48								
	Pa	irt II	Signature Block									
			Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statemen	ts, and to the best of my know	owledge and belief, it is true, correct,							
			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	· .								
	Sigr	,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	14-1	7-70							
	Here	- 1	Signature of officer	Date								
			Art Ayris, Executive Director									
			Type or print name and title									
	D=:4				Preparer's identifying number see instructions)							
	Paid	' l:	signature hospital CPA 03/29/10		P00148821							
	•		Firm's name (or Batts, Morrison, Wales & Lee, P.A.		20-4193611							
	Use	J,	self-employed), 1000 Legion Place, Suite 701									
			Orlando, Florida 32801	Phone no.	► 407-770-6000							
	May	the IR	S discuss this return with the preparer shown above? (see instructions)		X Yes No							
		01 12-18		nstructions.	Form 990 (2008)							
			, per mention in the mention of the department		=: = = = (=300)							

	990 (2008) Christian Care Center, Inc. 59-2790823 Page 2 t III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission.
'	Counseling and Shelters
2	Did the organization undertake any significant program-services during the year which were not listed on
	the prior Form 990 or 990-EZ? 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 services?
•	If "Yes", describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 614,590 . including grants of \$ 909 .) (Revenue \$
	Community Learning Center/21st Century Program. An afterschool and
	mentoring program for children and teens in the public schools. The
	goal is to provide strong role models, tutoring and prevent at-risk children and teens from dropping out of school. 500 students were
	reached during the tax year.
	Todolica dalling the tax year.
4b	(Code:) (Expenses \$ 509,241. including grants of \$ 56,796.) (Revenue \$
	Children's Shelter. A home for the temporary care of abused or
	neglected children where 179 foster children were admitted.
	· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ 416,606 and including grants of \$ 450 and in the call of the control of the
	Abstinence Education Program. An educational program in the school systems promoting sexual abstinence until marriage.
	systems promoting sexual abstinence until marriage.
	Other program services. (Describe in Schedule O.)
	(Expenses \$ 788,623. including grants of \$ 93,115.) (Revenue \$ 171,220.)
4e	Total program service expenses ▶\$ 2,329,060. (Must equal Part IX, Line 25, column (B))

	r		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_	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	
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_		<u>X</u>
4	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			77
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	·	٠,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		٠,,
	Schedule D, Part III	8		X
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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X_
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?		37	
	If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11_	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was		3,5	
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	4.01		₩.
	and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		<u> </u>
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			x
	located outside the United States? If "Yes," complete Schedule F, Part II	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	46		х
	located outside the United States? If "Yes," complete Schedule F, Part III	16 17	 	X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I			X
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 19		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	20		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	21		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 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	
22	Did the organization report more than \$5,000 on Part IX, column (A), limb 21 in Tes, "complete schedule I, Parts I and in Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Х
23		20		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.		1	
	If "No", go to question 25	24a		X
L	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
b	Did the organization invest any proceeds of tax-exempt boilds beyond a temporary period exception. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
C	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
-	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
Z Jd	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	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	<u> </u>	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		X
		Form	990	(2008)

Form,990 (2008) Christian Care Center, Inc.

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.			
а	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		<u>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? 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		X
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 7701-37 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		X
		Form	990 (2008)

b Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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

amounts due or received from them.)

Form **990** (2008)

12a

11b

Form,990 (2008) Christian Care Center, Inc. 59-2790823 Pa

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

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			i
1a	Enter the number of voting members of the governing body 1a 9			1
b	Enter the number of voting members that are independent 9			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			i
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		X
6	Does the organization have members or stockholders?	6	Х	
-	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	Х	
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
J	by the following	1		
•	The governing body?	8a	х	ĺ
a	Each committee with authority to act on behalf of the governing body?	8b	х	
On CO	Does the organization have local chapters, branches, or affiliates?	9a	<u> </u>	Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
D	and branches to ensure their operations are consistent with those of the organization?	9b		
40	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	30		
10		10	x	l
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		ļ
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	11		х
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<u> </u>	
<u>sec</u>	tion B. Policies		Yes	No
	December 12	12a	X	140
	Does the organization have a written conflict of interest policy? If "No," go to line 13	120	- 1	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	405		X
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.	v	
	in Schedule O how this is done	12c	X	v
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	 	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision.	_		37
а	The organization's CEO, Executive Director, or top management official?	15a	ļ	X
b	Other officers or key employees of the organization?	15b	-	X
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
	taxable entity during the year?	16a		X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			1
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		ŀ	
	exempt status with respect to such arrangements?	16b	L.,	L
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶FL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕽	-	
	Norma Hawkins - 352-314-8733			
	115 North 13th Street Leesburg FL 34748			

Form,990 (2008) Christian Care Center, Inc. 59-2' Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

Check this box if the organization did not c (A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		Position					Reportable	Reportable	Estimated
	hours	(0	hecl	eck all that apply)		ly)	compensation from	compensation from related	amount of other	
	per week	Individual trustee or director						the	organizations	compensation
		5	8			sated		organization	(W-2/1099-MISC)	from the
		Tuste	Institutional trustee)ee	Highest compensated employee		(W-2/1099-MISC)		organization
		fg	ig in the second	Officer	oldui	est co loyee	Jer			and related organizations
		Indry	şë	흏	Key	H E	Form			0.ga0
Anna Lee Miller - term		_		1						
ended 12/08 - Sec/Dir	10.00	X	L	X	<u> </u>			0.	0.	0.
Michael Holland - term		i							_	_
ended 12/08 - Director	2.00	X			<u> </u>	ـــــــــــــــــــــــــــــــــــــ	L	0.	0.	0.
Larry Freitag - term	1									
ended 12/08 - VP/Dir	2.00	X	_	X	<u> </u>	<u> </u>	_	0.	0.	0.
Jack Logan	1				ŀ					_
President/Director	15.00	X	ļ	X	-	-	<u> </u>	0.	0.	0.
Alice Weaver	1000		-			1				0.
Director	10.00	X	╁		┼-	+	_	0.	0.	0.
Sue Schindler	6 00	\ . .						0.	0.	0.
Director	6.00	1-2	╁	+	-	+	┢		0.	0.
Lee Evans Director	6.00	v			i			0.	0.	0.
Joe Rayl	0.00	^	+	+	T					
Vice President/Director	4.00	x		$ _{\mathbf{X}}$				0.	0.	0.
Rick Harper	1	T	1	 	\top	1				
Treasurer/Director	6.00	x	ļ	X				0.	0.	0.
Donna Goodwin			i.							
Secretary/Director	4.00	X		X				0.	0.	0.
Jeff Martin										
Director	8.00	X						0.	0.	0.
Ron Sebree										
Director	6.00	X	<u> </u>	_	<u> </u>	_	L	0.	0.	0.
Art Ayris							ļ			
Executive Director	10.00	↓_	igspace	X			_	6,700.	_0.	0.
				-	1					ļ
	ļ	+	╁	+-	+-	+	-			
	1	T	T	\dagger	T	1				
					$oxed{oxed}$		<u> </u>			
	1		丄				<u></u>	<u> </u>	<u> </u>	<u> </u>

<u> 59 – </u>	279	0823	Page 8

(A) Name and title		(B) (C) Average Position							(D) Reportable	(E) Reportable			(F) ımated	
		hours per week	director	Institutional trustee			Highest compensated de employee		compensation from the - organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	s	comp fro orga and	ount of other ensation m the nization related nization	on n d
	-													
												•		
														<u> </u>
1b Total									6,700.		0.			0.
	iduals (including thos he organization	e ın 1a) who re	Celv	ed n	nore	tha	ın \$1	00,			<u> </u>	T		No
line 1a? If "Yes," com	plete Schedule J for s	such individual							nighest compensated ei			3		X
and related organizat 5 Did any person listed	ions greater than \$15 on line 1a receive or	0,000? <i>If "Yes</i> accrue compe	," cc nsat	<i>mpl</i> tion 1	ete S	Sch	edul	e J i				4		<u>x</u>
Section B. Independent (ent c	ont	racto	ors t	that received more than	\$100,000 of con	npensa	5 dation fr	om	<u>X</u>
the organization	NONE (A) Name and business	address							(B) Description of	services	Ce	(C omper) isation	
														
		_	e in	1) w	ho r	ece	ıved	moi	re than \$100,000 in con	npensation		<u>.</u>		
from the organization	<u>.</u>	0										Form 9	990 (2	008

				<u>ce Center</u>	, Inc.	 	59-2790	823 Page 9
Par	t VII	I Statement of Reven	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f		ts, and the state of the state	.547757. 953,505. 130,926.				313, 61 314
	2 a b	Total. Add lines 1a-1f Rescue Mission		Business Code 900099	40,294.	40,294.		
Program Service Revenue	c d e							
a a	f g	All other program service reve Total. Add lines 2a-2f	nue		40,294.			
	3	Investment income (including other similar amounts) Income from investment of tax		•	646.		3335	646.
		Royalties Gross Rents	(i) Real 20,497					
	c d	Less rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of	1,069 19,428		19,428.			19,428.
		assets other than inventory Less cost or other basis and sales expenses Gain or (loss)						
nue	d	Net gain or (loss) Gross income from fundraising including \$		>				
Other Revenue	b	contributions reported on line Part IV, line 18 Less: direct expenses						
	9 a	Net income or (loss) from functions Gross income from gaming action Part IV, line 19 Less: direct expenses	_					
	c 10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances						
	С	Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu	s of inventory	Business Code	<700.	> <700.	<u>></u>	
	11 a b c							
83200 02-02-	e 12	Total. Add lines 11a-11d Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 1	10c, and 11e	2,560,930.	39,594.	0.	20,074. Form 990 (2008)

Form,990 (2008) Christian Care Center, Inc. Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl	ete column (A) but are	not required to comple	ete columns (B), (C), and	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21		-		
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22	151,270.	151,270.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	9,500.		9,500.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 01 5 5 5 6	1 050 510	15 011	
7	Other salaries and wages	1,315,556.	1,269,512.	46,044.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	60 605	F4 40F	0 100	
9	Other employee benefits	62,605.	54,407.	8,198.	
10	Payroll taxes	90,014.	86,597.	3,417.	
11	Fees for services (non-employees).				
а	Management	1 625	1 (25		
b	Legal	1,635.	1,635.	7,199.	
c	Accounting	22,199.	15,000.	7,199.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	4,107.	3,433.	674.	
g	Other	13,976.	13,937.	39.	
12	Advertising and promotion .	93,714.	77,335.	16,379.	
13	Office expenses	282.	282.	10,3/3.	
14	Information technology	202.			
15	Royalties	234,443.	225,438.	9,005.	
16	Occupancy Travel	51,505.	51,505.	<u> </u>	
17	Payments of travel or entertainment expenses	31,303.	31,303.		
18	for any federal, state, or local public officials				
10	Conferences, conventions, and meetings	15,086.	15,086.		
19 20	Interest	23,000.			<u></u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	124,915.	112,222.	12,693.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Counseling	162,579.	162,579.		
b	Miscellaneous	58,419.	52,745.	5,674.	
c	Educational Supplies	36,077.	36,077.		
d					
е					
f	All other expenses				
<u>25</u>	Total functional expenses Add lines 1 through 24f	2,447,882.	2,329,060.	118,822.	0.
26	Joint Costs. Check here If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					Form 990 (2008)

1				(A) Beginning of year		(B) End of year				
2 Savings and temporary cash investments 3 Peleges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, fusitiess, key employees, or other related parties. Complete Part I of Schedule L 6 Receivables from current and former officers, directors, fusitiess, key employees, or other related parties. Complete Part I of Schedule L 7 Notes and loans receivable, net 8 Inventioners for sate or use 9 Perpad depenses and deferred charges 10a 12,668,863. 10a 2,668,863. 11,846,270. 10c 1,771,426. 11 Investments - publicy traded securities 12 Investments - publicy traded securities 12 Investments - publicy traded securities 13 Investments - program-related. See Part IV, line 11 14 Intarriptie asserts 15 Other asserts See Part IV, line 11 16 Total assets. Add line 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 10 Deferred revenue 10 Tax-exempt bond liabidities 10 Deferred revenue 11 Escrow account liabidity. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, fusities, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and rose payable to unrelated third parties 23 Charles and C	- 1		Cash - non-interest-hearing		4	 				
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					-	Form 990 (2008)				

SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

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

Employer identification number

59-2790823 Christian Care Center, Inc. Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) A 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 June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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. c ____ Type III · Functionally integrated d ___ Type III - Other Type I b Type II 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 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11a(iii Provide the following information about the organizations the organization supports. h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization in col. (i) listed in your organization in col. support organization (i) organized in the (described on lines 1-9 governing document? (i) of your support? above or IRC section No (see instructions)) **Total** Schedule A (Form 990 or 990-EZ) 2008 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sch	edule A (Form 990 or 990-EZ) 2008 C	hristian (Care Cent	er, Inc.		59-279	0823 Page 2
Pa	rt II Support Schedule for	Organizations	Described in	Sections 170	b)(1)(A)(iv) and	d 170(b)(1)(A)(v	ri)
	(Complete only if you checked						
Se	ction A. Public Support		-				
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	909,561.	825,952.	1906848.	1982011.	2501262.	8125634.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities					-	
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 - 3	909,561.	825,952.	1906848.	1982011.	2501262.	8125634.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						113,590.
6	Public Support. Subtract line 5 from line 4						8012044.
	ction B. Total Support						
 Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 4	909,561.	825,952.	1906848.	1982011.	2501262.	8125634.
8	Gross income from interest,						
	dividends, payments received on				i		
	securities loans, rents, royalties			!		!	
	and income from similar sources	26,505.	33,286.	45,652.	47,292.	21,143.	173,878.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	21,000.					21,000.
11	Total support. Add lines 7 through 10		-				8320512.
	Gross receipts from related activities,		ons)			12 1	<u>,572,262.</u>
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor						
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2008 (line 6, column (f) d	ivided by line 11, o	column (f))		14	96.29 %
15	Public support percentage from 2007	' Schedule A, Part	IV-A, line 26f			15	93.34 %
16:	a 33 1/3% support test - 2008. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			$\triangleright \mathbf{X}$
ı	33 1/3% support test - 2007. If the o				line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation			▶□
17	a 10% -facts-and-circumstances tes	t - 2008. If the org	anization did not d	check a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check ti	nis box and stop h	ere. Explain in Pai	rt IV how the organ	ization

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

	Schedule A (Form 990 or 990-EZ) 2008 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)									
Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")									
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				- "					
3	Gross receipts from activities that									
	are not an unrelated trade or bus- iness under section 513									
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf									
5	The value of services or facilities furnished by a governmental unit to the organization without charge									
6	Total. Add lines 1 · 5									
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons									
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000									
c	Add lines 7a and 7b									
8	Public support (Subtract line 7c from line 6)									
Section B. Total Support										
Sec		(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc	tion B. Total Support	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12)									
Sec Calc 9 10a	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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.)									
Calc 9 10a b 11 12 13 14	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	r the organization'	s first, second, thu							
Calc 9 10a b 11 12 13 14	endar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	r the organization'	s first, second, thu							
Calc 9 10a b 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	r the organization' ic Support Pe	s first, second, thus	rd, fourth, or fifth t			zation, %			
Calc 9 10 a 10 a 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 from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Publ Public support percentage from 2007	the organization' ic Support Pe line 8, column (f) c' Schedule A, Pari	s first, second, thusercentage Ivvided by line 13, at IV-A, line 27g	rd, fourth, or fifth to		on 501(c)(3) organi	zation,			
Calc 9 10 a 10 a 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 from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	the organization' ic Support Pe line 8, column (f) c' Schedule A, Pari	s first, second, thusercentage Ivvided by line 13, at IV-A, line 27g	rd, fourth, or fifth to		on 501(c)(3) organi	zation, % %			
Calc 9 10 a 10 a 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 from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Publ Public support percentage for 2008 (Investment income percentage for 2007)	ic Support Peline 8, column (f) of Schedule A, Paristment Incom	s first, second, thusercentage livided by line 13, is IV-A, line 27g ie Percentage mn (f) divided by line	column (f))		on 501(c)(3) organi 15 16	zation, % % %			
Calc 9 10a 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Publ Public support percentage for 2008 (Investment income percentage from 2007) Extion D. Computation of Investment income percentage from 2007	ic Support Peline 8, column (f) of Schedule A, Partstment Incom	s first, second, thus rcentage livided by line 13, in the livided by line 27g ie Percentage mn (f) divided by line Part IV-A, line 27h	column (f))	ax year as a secti	on 501(c)(3) organi 15 16	zation,			
Calc 9 10a 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Extion C. Computation of Publ Public support percentage from 2007 Extion D. Computation of Investment income percentage from 2018 Investment income 2018 I	r the organization' ic Support Pe line 8, column (f) o' Schedule A, Part stment Incom 2007 (Schedule A, organization did recompliant)	s first, second, thus ercentage livided by line 13, secondage mn (f) divided by line 13, secondage mn (f) divided by line 10-A, line 27h, line 27h, line 27h, line 27h, line 10-C, the box	column (f)) ne 13, column (f)) on line 14, and line	ax year as a secti	15 16 17 18 33 1/3%, and line	zation,			
Calc 9 10a 11 12 13 14 See 15 16 See 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Extion C. Computation of Publ Public support percentage from 2007 Extion D. Computation of Investment income percentage from 2013 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	r the organization' ic Support Peline 8, column (f) o' Schedule A, Part stment Incom 2007 Schedule A, organization did ind stop here. The	s first, second, thus ercentage livided by line 13, secondage mn (f) divided by line Part IV-A, line 27h not check the box e organization qual	column (f)) ne 13, column (f)) on line 14, and line	ax year as a secti	15 16 17 18 33 1/3%, and line zation	zation,			
Calc 9 10a 11 12 13 14 See 15 16 See 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Extion C. Computation of Publ Public support percentage from 2007 Extion D. Computation of Investment income percentage from 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a 33 1/3% support tests - 2007. If the	ic Support Peline 8, column (f) of Schedule A, Partstment Incom 2007 Schedule A, organization did ind stop here. The organization did in the o	s first, second, thus ercentage livided by line 13, as IV-A, line 27g er Percentage mn (f) divided by line 27h not check the box erorganization quality of the check a box or	rd, fourth, or fifth to	ax year as a secti	15 16 17 18 33 1/3%, and line zation fore than 33 1/3%,	zation, % % % % 17 is not and			
Calc 9 10a 11 12 13 14 See 15 16 See 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Extion C. Computation of Publ Public support percentage from 2007 Extion D. Computation of Investment income percentage from 2013 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	ic Support Peline 8, column (f) of Schedule A, Part Stment Incom 100 (line 10c, column 10c) (line 1	s first, second, thus ercentage livided by line 13, a LIV-A, line 27g er Percentage mn (f) divided by line Part IV-A, line 27h not check the box e organization qual not check a box or top here. The organization	rd, fourth, or fifth to column (f)) ne 13, column (f)) on line 14, and line lifies as a publicly so the 14 or line 19a anization qualifies	ax year as a section of the supported organics, and line 16 is mas a publicly supported supported organics.	on 501(c)(3) organiation 15 16 17 18 33 1/3%, and line zation core than 33 1/3%, ported organization	zation, % % % % 17 is not and			

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Christian Care Center, Inc.

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

Employer identification number 59-2790823

Schedule D (Form 990) 2008

Pai	rt I Orga	anizations Maintaining Donor Advise	ed Funds or Other	Similar Funds	or Accou	nts. Complete if the				
	orgar	nization answered "Yes" to Form 990, Part IV, lin	e 6							
	-		(a) Donor advis	sed funds	(b) Fun	ds and other accounts				
1	Total numbe	r at end of year								
2	Aggregate c	ontributions to (during year)								
3		rants from (during year)			-					
4		alue at end of year								
5		nization inform all donors and donor advisors in	writing that the assets	held in donor advis	ed funds					
_		nization's property, subject to the organization's	-			Yes No				
6	_	nization inform all grantees, donors, and donor a	_		used only					
•	_	e purposes and not for the benefit of the donor				Yes No				
Pai		servation Easements. Complete if the or								
1	Purpose(s) c	of conservation easements held by the organizat	tion (check all that apply	<i>(</i>)						
		vation of land for public use (e.g., recreation or		eservation of an his	torically impo	ortant land area				
	Protection of natural habitat Protection of natural habitat Preservation of certified historic structure									
	Preservation of open space									
2										
_	of the tax ye					•				
						Held at the End of the Year				
а	Total numbe	er of conservation easements			2a					
b	b Total acreage restricted by conservation easements 2b									
c	c Number of conservation easements on a certified historic structure included in (a) 2c									
ď	d Number of conservation easements included in (c) acquired after 8/17/06									
3										
_	year ▶									
4	Number of s	tates where property subject to conservation ea	asement is located							
5		ganization have a written policy regarding the pe		ection, violations, ar	nd					
	enforcemen	t of the conservation easements it holds?				Yes No				
6	Staff or volu	nteer hours devoted to monitoring, inspecting, a	and enforcing easement	ts during the year 🕨	·					
7	Amount of e	xpenses incurred in monitoring, inspecting, and	enforcing easements d	luring the year ➤ \$						
8		conservation easement reported on line 2(d) abo								
	and section 170(h)(4)(B)(ii)?									
9	and the second s									
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for									
	conservation easements									
Pa		anizations Maintaining Collections o		reasures, or O	ther Simil	ar Assets.				
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.										
1a	•	zation elected, as permitted under SFAS 116, no								
	treasures, o	r other similar assets held for public exhibition, e	education, or research ii	n furtherance of pul	blic service, p	provide, in Part XIV, the text of				
		to its financial statements that describes these								
b		zation elected, as permitted under SFAS 116, to								
	or other sım	ılar assets held for public exhibition, education,	or research in furtheran	ce of public service	, provide the	following amounts relating to				
	these items.									
	(i) Revenue	es included in Form 990, Part VIII, line 1			>	\$ \$				
		ncluded in Form 990, Part X								
2	If the organi	zation received or held works of art, historical tre	easures, or other similar	assets for financia	l gaın, provid	е				
	the following	g amounts required to be reported under SFAS	116 relating to these ite	ms:						
а	Revenues in	ncluded in Form 990, Part VIII, line 1			>	\$				
b	Assets ınclu	ided in Form 990, Part X				\$ \$				

		an Care Ce				or Other			90823 S (continu			
	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all											
3	that apply).	rocordo, oricon arry		onowing tha	t aro a oigim	.ount doo c	3, 110 0000		(000	,		
а	Public exhibition	d		Loan or excl	hange progra	ams						
b	Scholarly research	e			nango progri							
	Preservation for future generations		· <u> </u>	O.1101			_					
C	The state of the s											
4	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets											
5	to be sold to raise funds rather than to be ma					or Similar c	233013		Yes	□ No		
Dar	t IV Trust, Escrow and Custodial					arad "Vae"	to Form 9	On Part				
rai	reported an amount on Form 990, Par		- Compi	ete ii oigani	Zation answ	160 163	to ronnis.	50, i ait	, mie 5,	OI .		
	Is the organization an agent, trustee, custodi		tian, for	contribution	e or other as	eate not in	ocluded					
ıa	_	an or other intermet	Jiai y IOI	CONTRIBUTION	S Of Other as	35613 1101 11	icidaea		Yes	□ No		
b	b If "Yes," explain the arrangement in Part XIV and complete the following table:											
	Amount 10											
	c Beginning balance											
	d Additions during the year											
е												
f	f Ending balance If Yes No.											
	Le bid in digenization in dictor and an array ar											
	b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.											
Par	t V Endowment Funds. Complete it		i .				71		4 > 5			
	-	(a) Current year	(b) P	rior year	(c) Two yea	rs back (c	1) Three year	rs back	(e) Four ye	ears back		
1a	Beginning of year balance											
b	b Contributions											
C	c Investment earnings or losses											
d	d Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
f	Administrative expenses						<u> </u>					
g	End of year balance							i				
2	But the second belong held as											
а	a Board designated or quasi-endowment											
b	b Permanent endowment \sim \%											
С	Term endowment	%										
За	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization											
	by.								Y	es No		
	(i) unrelated organizations								3a(i)			
	(ji) related organizations								3a(ii)			
b	If "Yes" to 3a(ii), are the related organizations	s listed as required of	on Sched	dule R?					3b			
4	Describe in Part XIV the intended uses of the											
Pai	t VI Investments - Land, Building				, Part X, line	10.						
	Description of investment	(a) Cost or o			or other (other)	(c) De	preciation		(d) Book v	/alue		
12	Land		-									
	Buildings											
	Leasehold improvements			2.25	9,458.	6	73,865	5.	1,585	,593.		
	Equipment				5,722.		09,129			,593.		
	Other				3,683.		14,44			,240.		
	. Add lines 1a-1e (Column (d) should equal Fo	orm 990. Part X. coli	umn (B).				1		1,771			

Schedule D (Form 990) 2008

under FIN 48.

		nc.	 	<u> 59-</u>	2/90823 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 99	0 to Financial S	Statements		0.560.000
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,560,930.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		2,447,882.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	-	113,048.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)		8		
9	Total adjustments (net) Add lines 4-8		9		0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 t XII Reconciliation of Revenue per Audited Financial State	mente With R	10	aturn	113,048.
	Total revenue, gains, and other support per audited financial statements	Sillerits With It	overide per i	1	2,562,699.
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				2/302/0331
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b		1	
c	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV)	2d		1	
e	Add lines 2a through 2d	L <u>.24</u> _1		2e	0.
3	Subtract line 2e from line 1			3	2,562,699.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
•	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a	Other (Describe in Part XIV)	4b	<1,769.	,	
b	Add lines 4a and 4b	- 70	\ <u></u> \\	4c	<1,769.
с 5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.	١		5	2,560,930.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Sta	tements With E	xpenses per		
1	Total expenses and losses per audited financial statements			1	2,449,651.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	1,769.		
е	Add lines 2a through 2d			2e	1,769.
3	Subtract line 2e from line 1			3	2,447,882.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 1	8.)		5	2,447,882.
	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F	Part III, lines 1a and	4; Part IV, lines 1	b and	2b; Part V, line 4; Part
X, Pa	art XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.				
D	ut WII Iius Ah Obhan Addustmants.				
Pa:	rt XII, Line 4b - Other Adjustments:				
Rei	ntal Property Expenses: -1069.				
	iour respectly dispenses. Leave				
Co	st of Goods Sold: -700.				
<u></u> _					
Pa	rt XIII, Line 2d - Other Adjustments:				
		_			
<u>ve</u>	ntal Property Expenses: 1069.				
<u>Co</u> :	st of Goods Sold: 700.	 	 -	Color	(ula D. (Farra 200) 2002
				ocned	lule D (Form 990) 2008

832054 12-23-08

SCHEDULE I (Form 990)			Grants and	ants and Other Assistance to Organizatio	Grants and Other Assistance to Organizations,	võ.		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		► Comple	 Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990. 	n answered "Yes," on F	" on Form 990, Pa n 990.	art IV, lines 21 or 22.		Open to Public , Inspection
Name of the organization	tton Christian Care	are Center	ter, Inc.				En	Employer identification number 59-2790823
Part General Ir	General Information on Grants and Assistance	Assistance						
1 Does the organiz	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	ubstantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	istance, and the selection	:
	criteria used to award the grants or assistance?	Ice?		of areast frieder in the United States	States			L&J Yes LA No
Part II Grants an	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	vernments and	Organizations in the	United States, C	omplete if the ord	anization answered "Y	es" on Form 990, Part IV	, line 21, for any
ا ر	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	000. Check this	box if no one recipient	t received more th	an \$5,000 Use Pa	art IV and Schedule I-1	(Form 990) if additional	space is needed
1 (a) Name and ac	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	Enter total number of section 501(c)(3) and government organizations	government org	ganizations					
3 Enter total numb	Enter total number of other organizations For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	on Act Notice,	see the Instructions f	for Form 990.				Schedule I (Form 990) 2008

59-2790823

Page 2

I (Form 990) 2008 Christian Care Center, Inc.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed

Schedule I (Form 990) 2008
Part III Grants and Othe

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Assistance to the needy, including personal care items/services, rent, utilities, telephone, supplies medical food clothing gas etc.	47029	o	151,270		Personal care items, rent, utilities, telephone, supplies, medical, food clothing, gas, etc,
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the informatio	n required in Part I,	line 2, and any other	additional information.	
Schedule I, Part I, Line 2: Each m	Each ministry has		a policy or procedure	edure in	
place that regulates and monitors		ce that is	assistance that is provided to those	to those the	
Organization helps and assists. T	The Organization		evaluates each	ch	
applicant's financial and personal	situation	ţ	determine the	the type and	
amount of assistance it deems necessary.	ssary.	Files are	are maintained	for each	
individual who requests assistance from the Organization.	e from th	e Organiza		A vast majority	
of the assistance is provided through		payments direc	directly to vendors or	dors or	
through vouchers. Cash assistance	-1 S	provided in ra	in rare instances	es and is not	
tracked separately by the Organization.	ı	Distributions	ns are gen	are generally made	~

Schedu	ile I (Form 990) 2008	3	$_$ Chris	tian	Ca	re Cent	er, Inc.		59	<u>9-27908</u>	23 Page 2
Part	ĪV∐	Supple	emer	ntal Inforr	mation				er, Inc.				
							-						
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<u>011 a</u>	<u>. O</u>	me-c.	rme	Dasta	CHELET	OTE	110	Oligoring	MOHIT COLI	119 1	s deemed	Hecess	ary.
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SCHEDULE M (Form 990)

NonCash Contributions

➤ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

2008
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Christian Care Center, Inc. Employer identification number 59-2790823

Types of Property (a) (b) (c) (d) Method of determining Check if Number of Revenues reported on applicable contributions Form 990, Part VIII, line 1g revenues Art - Works of art Art - Historical treasures 2 3 Art - Fractional interests 4 Books and publications 130,926. Thrift store price Clothing and household goods X 5 6 Cars and other vehicles Boats and planes 7 8 Intellectual property 9 Securities - Publicly traded Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests 12 Securities - Miscellaneous Qualified conservation contribution 13 (historic structures) Qualified conservation contribution (other) 14 Real estate - Residential 15 Real estate - Commercial 16 17 Real estate - Other Collectibles 18 19 Food inventory Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 25 Other 26 Other 27 Other 28 Other 29 Number of Forms 8283 received by the organization during the tax year for contributions 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for X 30a the entire holding period? **b** If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II. 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Schedule M (Form 990) 2008

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ 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.

2008
Open to Public Inspection

Name of the organization

Christian Care Center, Inc.

Employer identification number 59-2790823

Form 990, Part III, Line 2, New Program Services:
Community Learning Center/21st Century Program. An afterschool and
mentoring program for children and teens in the public schools. The
goal is to provide strong role models, tutoring and prevent at-risk
children and teens from dropping out of school. 500 students were
reached during the tax year.
Form 990, Part III, Line 4d, Other Program Services:
Rescue Mission. A shelter for the temporary care and assistance of 346
men in crisis.
Expenses \$ 208731. including grants of \$ 16834. Revenue \$ 37504.
Women's Care Center. A shelter for the care of 64 women and their
children in crisis or poverty.
Expenses \$ 132220. including grants of \$ 5591. Revenue \$ 2790.
Residential Group Home. A shelter with a home environment for the
long-term care of abused or neglected children. 11 were served
throughout the year. The home closed October 31, 2008.
Expenses \$ 119473. including grants of \$ 14060. Revenue \$ 0.
Village Thrift Store. Sale of donated clothing and household goods to
needy individuals in order to give them access to affordably-priced
necessities.
Expenses \$ 115935. including grants of \$ 852. Revenue \$ 130926.

SCHEDULE O

(Form 990)

832211 12-18-08

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► 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.

2008
Open to Public Inspection

Employer identification number

Schedule O (Form 990) 2008

Name of the organization

Form 990 or to provide any additional information.

59-2790823 Christian Care Center, Inc. Pregnancy Care Center. A counseling center for pregnant women and teenagers providing alternatives to abortion. 1,174 women were served in the Pregnancy Care Center. Expenses \$ 111293. including grants of \$ 21604. Revenue \$ 0. Benevolent Center. A program to provide assistance to anyone in need or crisis. Food, clothing and utility assistance are distributed through this program. 11,066 were served throughout the year. Expenses \$ 100971. including grants of \$ 34174. Revenue \$ 0. Form 990, Part VI, Section A, line 6: The Organization has one class of members which consists of the membership of the First Baptist Church of Leesburg, Inc. Form 990, Part VI, Section A, line 7a: The membership of the Organization approves the members of the governing body. Form 990, Part VI, Section A, line 10: The Organization's top management official and top financial official each review the Form 990 prior to its filing with the IRS. A copy of the final Form 990 is also provided to the voting members of the Organization's governing body prior to its filing with the IRS. Form 990, Part VI, Section B, Line 12c: The Organization analyzes each potential transaction with a related party against the Organization's conflict-of-interest policy. Transactions are not entered unless they meet

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

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ 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.

2008
Open to Public Inspection

Name of the organization Christian Care Center, Inc.	Employer identification number 59-2790823
	39-2190023
the stated objectives in the policy.	
Form 990, Part VI, Section B, Line 15: The Organization's	executive
director requested he be paid only a nominal compensation	for his services.
Form 990, Part VI, Section C, Line 19: The Organization p	provides, upon
request, copies of its Articles of Incorporation, bylaws,	and its conflict
of interest policy.	
Form 990, Part XI, Line 2c:	
The Organization's Board of Directors, or a committee the	ereof, assumes
responsibility for the oversight of the audit of its fina	ncial
statements and the selection of an independent accountant	. This
process has not changed from the prior year.	