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Form 990-EZ

Short Form

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year

may use this form

OMB No 1545 1150

2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For t	he 2009 ca	alendar	r ye	year, or	tax yea	ır begi	inning				, 2009	9, and <u>e</u>	ndir	ng							
B	Check	if applicable		C	C			_									DΕ	mploy	er ıd	lentification	numbe	r
	Addres	s change	Please use IRS	i A	AMER]	CAN	PILG	RIMS	ON TH	HE CA	ONIMA							1-0)7 2	25409		
	Name	change	label or print or		1514	CHAN	NING	AVE	NUE								ΕT	elepho	ne n	umber		
	Initial		type. See	P	PALO	ALTO	, CA	9430	03-280)1							1 6	550-	-34	46-279	99	
H	Termir		Specific Instruc-																			
H		led return ation pending	tions.															roup umb		emption	•	
11				<u> </u>		••								G	Λ	ccountir		<u>_</u>	Ħ	Cash	<u>ν</u> Λ.	crual
		Section 5	ust atta	3) c	organi. ch a coi	npletec	and 4 Sche	edule A	1) nonex (Form 9	empt of 90 or 9	charitabi 190-EZ).	e trusts		1	0	ther (sp	ecify) 🕨	·	<u></u>			
		_	WW . AM											Н	re	heck Pequired	to attac	h Sc		anızatıor Iule B (F		
		xempt status									4947(a		527			90-EZ, (
к —	\$25,0	k ► []if 000 A Form	the orga n 990-EZ	gan Z o	or Form	n is not 1990 ret	a sec	tion 509 not requ	9(a)(3) sured, but	upporti if the o	ng orgar organizati	nization on choo	and its ses to fi	gro le a	ret	receipts urn, be s	s are no sure to fi	rmal le a	ly n com	i ot more iplete reti	than urn	
L		ines 5b, 6 ad of Form				e 9 to d	determ	nine gro	ss recei	pts, if \$	\$500,000	or moi	re, file F	orm	า 9	90		•	\$		55,	497.
Re	rt l	Reve	enue, l	E	xpen	ses, a	nd Cl	hange	s in Ne	et Ass	ets or	Fund	Balan	ces	s (:	See th	e ınstr	ucti	on	s for P	art I.)	
21	1	Contribut																	Т			217.
	2	Program	service	e re	revenue	ıncludi	ng go	vernme	nt fees a	and cor	ntracts							2	T		20,	995.
5	3	Members	hip dues	es a	and as	sessme	ents											3	\top		13,	080.
4	4	Investme	nt incon	me	ne.													4	\top			205.
MCZECEN APP	5a	Gross am	ount fro	rom	m sale	of as <u>se</u>	ts othe	e <u>r th</u> an	inventor	у			5 a						Т			
T	b	Less cos Gain or (loss	tor oth	hen	ক্র ক্রান্ত	ant/sa	Teşî ≩x	penses					5 b] _	.			
R	С	Gain or (loss	s from s	sale	0 0 000	ts other t	ian mve	၅(၀) (Su	ubtract In 5	ib from Ir	n 5a)							5	c			
Ϋ́	6	Special ever	ntis and ac	activ	ivities (co	mplete a	pplicable	e parts of	Schedule	G) If any	y amount i	s from ga	amıng, ch	eck h	nere		-		T			
N	а	Gross rev	relited (n	(ne)	MARIU	ეგიტ}\$2	010	اي		_of co	ntributio	ns						l				
> E		reported (on nh e i	: 1))			8		_			6 a)	-			
3	b	Less dire	ec expe	On	nees ot	ie<u>r</u> (hai	Tundi		expense	s			6 b]				
	С	Net income	or (loss) f) f.6	6	alsovents.	ahe act	uvities_(Si	ubtract line	e 6b from	i line 6a)							_ 6	c_			
	7 a	Gross sal	es of in	nve	entory,	less re	turns	and allo	wances				7a				_		Т			
	b	Less cos	t of goo	ods	ds sold								7 b]				
	c	Gross pro	ofit or (lo	(los	ss) fror	n sales	of inv	entory ((Subtrac	t line 7	b from l	ne 7a)						7	С			
	8	Other revenu	ue (descri	cribe	be ►						_)	_ 8	\perp			
	9	Total reve	enue A	Add	dd lines	1, 2, 3	, 4, 5c	, 6c, 7c	, and 8								•	9			55,	497.
	10	Grants ar	nd sımıla	ılar	r amou	nts paid	d (atta	ch sche	dule)				SEE S	TAT	TE	MENT	1	10	\top		22,	047.
_	11	Benefits p	paid to d	or	r for m	embers	•		-									11	T			
EXPENSE	12	Salaries,	other co	con	mpensa	ation, a	nd em	ployee	benefits									12	T			
Ē	13	Professio	nal fees	es a	and otl	ner pay	ments	to inde	pendent	contra	ctors							13	\top			239.
S	14	Occupano	cy, rent,	ıt, u	utilities	, and m	nainter	nance										14	Т			
E S	15	Printing,																15	T			996.
-	16	Other expens	ses (desci	crib	ıbe ► <u>S</u>	EE S	<u>latei</u>	MENT	2)	16	I		42,	065.
	17	Total exp	enses.	A	Add line	es 10 th	rough	16								_		17	\perp		67,	347.
	18	Excess or	r (deficil	cit)) for the	year (Subtra	act line	17 from	line 9)								18	\perp		-11,	<u>850.</u>
N S E E T	19	Net asset figure rep	s or fun	ınd on	d baland	ces at b	eginn eturn)	ing of y	ear (fror	n line 2	27, colur	nn (A))	(must a	agre	e v	vith end	-of-year	19			49,	184.
Ţ	20	Other cha			-		-	alances	(attach	explan	ation)							20	T			
s	21	Net asset	s or fun	<u>ınd</u>	d baland	ces at e	end of	year C	ombine	lines 1	8 throug	h 2 <u>0</u>					•	21	T		37,	334.
Pa	rt II								e 25, col				00 or mo	ore,	file	e Form 9	990_inst	ead	of F	orm 990	ı-EZ	
									Part II)						_	Beginni				(B) End		ar
22	Cas	sh, savings	s, and in	IDV	vestme	nts									_	5	0,494	. 2	2		35,	521.
23		nd and buil																2				
24	Oth	er assets	(describ	ıbe	e ► <u>S</u>	EE S	<u> PATE</u> I	MENT	3		_)						500		4			509.
25		al assets						<u> </u>									0,994		_			030.
26	Tot	al liabilitie	es (desc	scrit	ribe 🟲 _	SEE :	<u>STAT</u>	EMENI	' 4)						1,810		_			696.
_27		assets or														4	9,184	. 2	7			<u>334.</u>
BA	A Fo	r Privacy A	Act and	d Pa	Paperw	ork Rec	luction	n Act N	otice, se	e sepa	rate inst	ruction	1S.			· <u></u>		_		Form 9	90-EZ	(2009)

Form 990-EZ (2009) AMERICAN PILGRI				<u>-072</u>	25409 Page 2
Part III Statement of Program Sei		(See the instruction	ons.)	(Pog	Expenses
What is the organization's primary exempt purpose? <u>SEI</u> Describe what was achieved in carrying out th describe the services provided, the number of	E STATEMENT 5 e organization's exempt purp	poses In a clear and co	oncise manner,	501(uired for section c)(3) and (4) nizations and section (a)(1) trusts, optional
program title	persons benefited, or other		eacn	for o	thers)
28 ANNUAL NATIONAL GATHERING		D MEMBERS WAS	HELD IN		
ALBUERQUE, NEW MEXICO IN	MARCH 2009.				
	is amount includes foreign gi		<u>-</u>	28 a	24,098.
29 TRAINING PROGRAMS ARE HEL CAMINO.	D TO TRAIN MEMBERS	TO BE OF SERV	<u>ICE ON THE</u>		
(Grants \$) If th	s amount includes foreign gi	 rants. check here		29 a	919.
30 CAMINO SUPPORT PROGRAMS A INFRASTRUCTURE.					
(Grants \$ 22,047.) If th	s amount includes foreign gi	rants, check here	<u>-</u> X	30 a	22,139.
31 Other program services (attach schedule	SEE STATEMENT 6				
(Grants \$) If th	is amount includes foreign gi	rants, check here	P []	31 a 32	5,201. 52,357.
Part IV List of Officers, Directors,		plovees. List each or	ne even if not com		
	(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense account
(a) Name and address	per week devoted to position	not paid, enter -0)	employee benefit plan deferred compensa		
JIM EYCHANER	CHAIRMAN O			0.	0.
1514 CHANNING AVENUE PALO ALTO, CA 94303	U				
CHERIE PAGETT	VICE PRESIDENT	0.		0.	0.
1514 CHANNING AVENUE PALO ALTO, CA 94303	0				
NICK HAYES	TREASURER	0.		0.	0.
1514 CHANNING AVENUE PALO ALTO, CA 94303	0			_	
ANNETTE ARGALL	SECRETARY	0.		0.	0.
PALO ALTO, CA 94303					
					
BAA	TEEA0812L C	01/30/10			Form 990-EZ (2009)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
a	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice	35-		Į,
	reporting, and proxy tax requirements? If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 a 35 b		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the			
	year? If 'Yes,' complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0 0 Did the organization file Form 1120-POL for this year?	37 b		Х
	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	0, 5		-
30 6	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		X
t	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A	<u> </u>		
39	Section 501(c)(7) organizations Enter	7		
	a Initiation fees and capital contributions included on line 9	⊣		
	Gross receipts, included on line 9, for public use of club facilities 39b N/A	<u>}</u>		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ►			
t	s Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If	l		.,
	Yes, complete Schedule L, Part I	40 b	-	X
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.	_		
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
ε	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		X
41	List the states with which a copy of this return is filed NONE	400	<u>. </u>	<u> </u>
•••				
42 a	a The organization's books are in care of ► NICHOLAS HAYES Telephone no ► 610-8	96-2	774	
	books are in care of ► NICHOLAS HAYES Telephone no ► 610-8 Located at ► 17 S. BUCK LANE HAVERFORD PA ZIP + 4 ► 19041			
			V	N.
t	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b	Yes	No X
	If 'Yes,' enter the name of the foreign country	72.0		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts			v
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42 c		X
	If 'Yes,' enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		▶ 🗌	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead			
	of Form 990-EZ	44	-	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		X
BAA		rm 99 0)-EZ (

Form 990-	EZ (2009) AMERICAN PILGRIMS (01-072	
Part VI	Section 501(c)(3) organization	s and section 4947	(a)(1) nonexempt	charitable trusts on	ly. All section
-	501(c)(3) organizations and se	ction 4947(a)(1) no	nexempt charitabl	e trusts must answe	r questions
	46-49b and complete the table	s for lines 50 and 5) . 	SEE S	TATEMENT 7
46 Did t	he organization engage in direct or indire	et political campaign a	ctivities on behalf of or	run apposition to candidal	Yes No
46 Didt	ublic office? If 'Yes,' complete Schedule	C, Part I	ctivities off benan of of	in opposition to candidate	46 X
•	he organization engage in lobbying activi		Schedule C. Part II		47 X
	e organization a school as described in s			edule E	48 X
	he organization make any transfers to ar				49a X
	es,' was the related organization a section				49 b
	·	_			1.1
50 Com	plete this table for the organization's five loyees) who each received more than \$10	highest compensated (employees (other than from the organization	officers, directors, trustee	es and key lone '
	<u> </u>	(b) Title and average	(c) Compensation	(d) Contributions to employee	(e) Expense
(a)) Name and address of each employee paid more than \$100,000	hours per week devoted to position		benefit plans and deferred compensation	account and other allowances
NONE				<u> </u>	
MOINT _					
				 	
				-	
				<u> </u>	
f Total	I number of other employees paid over \$	l00,000 ►			
51 Com	plete this table for the organization's five pensation from the organization. If there	highest compensated i	ndependent contractor	s who each received mor	e than \$100,000 of
	perisation from the organization in there	3 Hone, enter None			
	(a) Name and address of each independent conf	ractor paid more than \$100,000)	(b) Type of service	(c) Compensation
NONE_					
]		
		···			
					
					
d Total	I number of other independent contractor	s each receiving over \$	100 000	<u> </u>	
u rotai	Thamber of other independent contractor	s cach receiving over \$	100,000		
	Under penalties of perjury, I declare that I have exar	nined this return, including acco	ompanying schedules and stat	tements, and to the best of my kno	wiledge and belief, it is
	true, correct, and complete Declaration of preparer	(other than officer) is based on	all information of which prepa	rer has any knowledge	
		4-0-0		ı	
Sign		<i></i>			
Here	Signature of officer	C. HAYES.	- Treasurer	Date 03/2	> 1 m
	\	C. MAYES	- reasurer	03/2	5/10
	Type or print name and title				
بنده	Preparer's \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	001	Date	Check if Pre	parer's Identifying Number e instructions)
Pre-	signature (Sui Sow)	y CPA	3/15/1	O self- employed ► X N	
parer's	Firm's name (or ANN HEIDENREICH	HOWLEY, CPA			. —
Use	yours if self employed), > 10736 JEFFERSON	BLVD. #520		EIN ►	N/A
Only	addrace and	90230		Phone no ► (310) 838-5177
May the IF	RS discuss this return with the preparer s	· · · · · · · · · · · · · · · · · · ·	ictions		►X Yes No
	to discuss this retain with the preparer s	TOTAL GOOD TOTAL	20110113		127 162 1110

SCHEDULE A (Form 990 or 990-EZ)

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545 0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Employer identification number Name of the organization AMERICAN PILGRIMS ON THE CAMINO 01-0725409 TI

ar	t I	Reason for Pu	<u>blic Charity Statu</u>	i s (All organizations	must d	comple	te this	part.)	<u>See i</u>	<u>nstruct</u>	ions	
he o	orga	nization is not a pri	vate foundation becau	ise it is (For lines 1 thro	ugh 11,	check o	nly one	box.)				
1	\Box	A church, conventi	on of churches or ass	ociation of churches desc	cribed in	section	1 70 (b)	(1)(A)(i)				
2	П	A school described	in section 170(b)(1)(A)(ii). (Attach Schedule E	Ξ)							
3	П	A hospital or coope	erative hospital service	e organization described	ın secti	on 170(l	b)(1)(A)(iii).				
4	П			ed in conjunction with a h					0(b)(1)(A	A)(iii) Er	nter the hospita	l's
	لبا	name, city, and sta	- ·	,	·							
5		An organization op 170(b)(1)(A)(iv). (C	erated for the benefit	of a college or university	owned	or oper	ated by	a gover	nmenta	l unit de:	scribed in secti	on -
6 7		An organization tha		governmental unit descri substantial part of its su art II)					t or fron	n the ger	neral public des	cribed
8		A community trust	described in section 1	170(b)(1)(A)(vi). (Comple	te Part I	1)						
9	X	from activities relate investment income	ed to its exempt function	more than 33-1/3 % of its s is — subject to certain exce iss taxable income (less complete Part III)	eptions, a	and (2) n	io more 1	than 33-	1/3 % of	its suppo	ort from gross	after
10	П	An organization org	ganized and operated	exclusively to test for pu	iblic safe	ety See	section	ı 509(a)	(4).			
11		An organization org more publicly supp describes the type	ganized and operated orted organizations of of supporting organiz	exclusively for the benef described in section 509(a zation and complete lines	fit of, to a)(1) or s 11e thi	perform section rough 11	the fun 509(a)(2 Ih	ctions (2) See	of, or ca section	rry out th 509(a)(3	ne purposes of B). Check the b	one or ox that
		а Туре I	b Type II	c Type III		-	_			d 📙	Type III- Oth	
е		By checking this both than foundation material 509(a)(2)	$\frac{1}{2}$ ox, I certify that the or anagers and other tha	ganization is not controll n one or more publicly si	ed direc	tly or in d organi	directly zations	by one describe	or more ed in se	disqualiction 509	ified persons o (a)(1) or section	ther
f		check this box		ermination from the IRS								
g		Since August 17, 2	2006, has the organiza	tion accepted any gift of	r contrib	ution fro	om any	of the fe	ollowing	persons	,7	
											Ye	s No
		(i) a person who below, the go	o directly or indirectly overning body of the s	controls, either alone or tupported organization?	together	with pe	rsons d	escribe	d in (ii) i	and (III)	11 g (i)	
		(ii) a family mem	nber of a person desc	cribed in (i) above?							11 g (ii)	
		(iii) a 35% contro	lled entity of a person	n described in (i) or (ii) al	bove?						11 g (iii)	
h		Provide the following	ng information about t	the supported organization	ns							
	(1	Name of Supported Organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the ion in cold in your irning ment?	the organ	(I) of	organizat	Is the ion in col zed in the S ?	(vii) Amount of S	upport
					Yes	No	Yes	No	Yes	No		

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

Schedule A (Form 990 or 990-EZ) 2009

Pai	(Complete only if you check	_				1 170(D)(1)(A)	(VI)
Sec	tion A. Public Support	ed the box on him	e 5, 7, 01 8 01 Pal	(1)			
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					-	
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	**	***		٠ ٤٠		
Sec	tion B. Total Support						
Calendar year (or fiscal year beginning in) ►		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
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)						
11	Total support. Add lines 7 through 10	·	*	•	<i></i>		
12	Gross receipts from related activ	rities, etc (see in	structions)			12	L
13	organization, check this box and	stop here	·	nd, third, fourth,	or fifth tax year as	a section 501(c)	(3)
	tion C. Computation of Pu					1	
	Public support percentage for 20 Public support percentage from	•	•	ne 11, column (f)		14 15	%
16 a	a 33-1/3 support test – 2009. If the and stop here. The organization				d the line 14 is 33-	1/3 % or more, c	heck this box
ŀ	33-1/3 support test — 2008. If the and stop here. The organization				a, and line 15 is 33	-1/3% or more, o	check this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance:	s' test, check this	box and stop here	e. Explain in Parl	t IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance: test The organi	s' test, check this zation qualifies a	s box and stop here s a publicly suppor	e. Explain in Part ted organization.	t IV how the ►
18 BAA		zation did not che	eck a box on line,	13, 16a, 16b, 17			90 or 990-FZ) 2009

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.)

	(Complete only if you che	cked the box on in	10 3 01 1 011 1 7				
	tion A. Public Support		4,000	() 0007	(1) 0000	(.) 0000 T	(D. T. d. d.
	idar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	34,052.	25,163.	19,078.	37,748.	34,297.	150,338.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	47,975.	37,387.	18,852.	33,750.	20,995.	158,959.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge			:			0.
6	Total. Add lines 1 through 5	82,027.	62,550.	37,930.	71,498.	55,292.	309,297.
	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the	0.	0.	0.	0.	0.	0.
_	year Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
		0.	0.	<u> </u>	<u> </u>		<u> </u>
٥	Public support (Subtract line						309,297.
	7c from line 6)	<u> </u>	<u>l</u>				303,231.
- C-							
	tion B. Total Support	(a) 200E	(h) 2006	(a) 2007	(4) 2008	(a) 2009	(n Total
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale 9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	(a) 2005 82, 027.	62,550.	37,930.	71,498.	55,292.	309,297.
Cale 9 10 a	ndar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,		62,550.	37, 930. 50.	71,498.	55,292. 205.	309,297. 548.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses		62,550.	37,930.	71,498.	55,292.	309,297. 548.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	82,027.	62,550.	37, 930. 50.	71,498.	55,292. 205.	309,297. 548. 0. 548.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12)	0.	62,550. 27.	37, 930. 50.	71,498. 266.	55,292. 205. 205.	309,297. 548. 0. 548. 0. 309,845.
Cale 9 10 a 10 a 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	82,027. 0. s for the organizatop here	62,550. 27. 27.	37, 930. 50.	71,498. 266.	55,292. 205. 205.	309,297. 548. 0. 548. 0. 309,845.
Cale 9 10 a 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	82,027. 0. s for the organization here blic Support P	27. 27. ation's first, secondercentage	37, 930. 50. 50.	71, 498. 266. 266.	55, 292. 205. 205.	309,297. 548. 0. 548. 0. 309,845. 3) ► □
Cale 9 10 a 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	0. s for the organization here blic Support P 009 (line 8, column	27. 27. ation's first, secondercentage of (f) divided by line	37, 930. 50. 50.	71, 498. 266. 266.	205. 205. 205.	309,297. 548. 0. 548. 0. 309,845. 309,845. 99.8%
Cale 9 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 form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage from	s for the organization here blic Support P 109 (line 8, columnation 2008 Schedule A,	27. 27. 27. etion's first, second ercentage on (f) divided by line Part III, line 15	37, 930. 50. 50.	71, 498. 266. 266.	205. 205.	309,297. 548. 0. 548. 0. 309,845. 3) ► □
Cale 9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from tion D. Computation of Invitor 10 parts 11 parts 10 parts 11 par	us for the organization here blic Support P 009 (line 8, column 2008 Schedule A, restment Incon	27. 27. 27. etion's first, secondercentage of (f) divided by line Part III, line 15 ne Percentage	37, 930. 50. 50.	71, 498. 266. 266.	205. 205. 205.	309,297. 548. 0. 548. 0. 309,845. 309,845. 99.8% 0.0%
Cale 9 10 a 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage from the support income percentage from the support income percentage from the support percentage from	stop here blic Support P 09 (line 8, column 2008 Schedule A, restment Incon for 2009 (line 10c,	27. 27. 27. 27. ercentage n (f) divided by line Part III, line 15 ne Percentage column (f) divided	37, 930. 50. 50. 4, third, fourth, of third, fou	71, 498. 266. 266.	205. 205. 205. 3 section 501(c)(3	309,297. 548. 0. 548. 0. 309,845. 309,845. 309,845. 0.0% 0.2%
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 form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from tion D. Computation of Invitor 10 parts 11 parts 10 parts 11 par	1s for the organization did not organization did no	27. 27. 27. 27. ercentage n (f) divided by line Part III, line 15 ne Percentage column (f) divided le A, Part III, line check the box on lie	37, 930. 50. 50. 4, third, fourth, (e. 13, column (f)). 51 by line 13, column (f). 52 by line 14, and line 15	71, 498. 266. 266. or fifth tax year as more than 33-1/3	205. 205. 205. 15 16 17 18 %, and line 17 is not	309,297. 548. 0. 548. 0. 309,845. 309,845. 0.0% 0.2% 0.0%
Cale 9 10 a 11 12 13 14 Sec 17 18 19 a 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from the support percentage from the support income percentage from the support tests — 2009. If the 6 33-1/3 support tests — 2009. If the	82,027. 0. 1s for the organization did not ox and stop here. 1stop here. 1stop here. 2008 Schedule A, restment Incomer 2009 (line 10c, from 2008 Schedule organization did not ox and stop here. 1stop he organization did not ox and stop here. 2008 Schedule organization did not ox and stop here. 2008 Schedule organization did not ox and stop here.	27. 27. 27. 27. 27. ercentage In (f) divided by line Part III, line 15 ne Percentage column (f) divided le A, Part III, line check the box on line The organization d not check a box be here. The organi	37, 930. 50. 50. 4, third, fourth, of third, and line 15 qualifies as a pure on line 14 or 19 azation qualifies as	71, 498. 266. 266. or fifth tax year as some than 33-1/3 oblicly supported ca, and line 16 is mis a publicly supported supported to the supported can be supported to the supported can be supported to the sup	205. 205. 205. 205. 15 16 17 18 %, and line 17 is not riganization hore than 33-1/3% orted organization	309,297. 548. 0. 548. 0. 309,845. 309,845. 300,0% 0.2% 0.0% ► [X]

Schedule A	A (Form 990 or	990-EZ) 2009	AMERICAN	PILGRIMS	S ON THE	CAMINO	01-0725409	Page 4
Part IV	Supplemer	ntal Informa	tion. Comple	te this part	to provide	the explana	ations required by Part II, onal information. See inst	line 10;
\ <u></u>	Part II, line	: 17a or 17b	; and Part III	, lıne 12. P	rovide any	other addition	onal information. See inst	ructions.
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2009	FEDERAL STATEMENTS		PAGE 1
	AMERICAN PILGRIMS ON THE CAMINO		01-0725409
STATEMENT 1 FORM 990-EZ, PART I, LINE 10 GRANTS AND SIMILAR AMOUN	TS PAID		
DONEE'S NAME: CASH AMOUNT GIVEN:	FUENTERROBLE ALBERGUE	\$	18,047.
DONEE'S NAME: CASH AMOUNT GIVEN:	FUTURE EDUCATION FILMS	\$	4,000.
STATEMENT 2 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES BANK CHARGES CONFERENCES, CONVENTIONS, INSURANCE MEMBER GATHERING MEMBER RETREAT MEMBER TRAINING OFFICE EXPENSES PAY PAL/MEMBER CLICKS CHA TELEPHONE WEBSITE EXPENSES		\$ TOTAL <u>\$</u>	110. 9,169. 2,380. 23,424. 2,240. 909. 269. 2,756. 567. 241. 42,065.
STATEMENT 3 FORM 990-EZ, PART II, LINE 24 OTHER ASSETS			
PREPAID EXPENSES AND DEFE	RRED CHARGES TOTAL	BEGINNING \$ 500. \$ \$ 500. \$	4,509. 4,509.
STATEMENT 4 FORM 990-EZ, PART II, LINE 26 TOTAL LIABILITIES			
DEFERRED REVENUE	TOTAL	BEGINNING \$ 1,810. \$ \$ 1,810. \$	2,696. 2,696.
STATEMENT 5 FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EX	EMPT PURPOSE		

TO FOSTER THE ENDURING TRADITION OF THE CAMINO DE SANTIAGO BY SUPPORTING ITS INFRASTRUCTURE, BY GATHERING PILGRIMS TOGETHER AND BY PROVIDING INFORMATION AND ENCOURAGEMENT TO PAST AND FUTURE PILGRIMS.

09	FEDERAL STATEMENTS		PAGE
AN	MERICAN PILGRIMS ON THE CAMINO		01-07254
STATEMENT 6 FORM 990-EZ, PART III, LINE 31 STATEMENT OF PROGRAM SERVIC	CE ACCOMPLISHMENTS		
DESC	RIPTION	GRANTS	PROGRAM SERVICE EXPENSES
CAMINO CREDENTIALS ARE PROVI			2,720
A RETREAT RELATED TO THE CAM THE ANNUAL GATHERING.	INO EXPERIENCE IS HELD DURING INCLUDES FOREIGN GRANTS: NO		2,240
WEBSITE IS PROVIDED FOR MEMBER AND RELATED INFORMATION.	ERSHIP TO PROVIDE ASSOCIATION INCLUDES FOREIGN GRANTS: NO		241
	TOTAL	\$ 0.	5,201
(A) DID THE ORGANIZATION, DUINDIRECTLY, TO PAY PREMIUMS (ATED WITH PERSONAL BENEFIT CONTRUCTION THE YEAR, RECEIVE ANY FUND ON A PERSONAL BENEFIT CONTRACT? URING THE YEAR, PAY PREMIUMS, DINEFIT CONTRACT?	S, DIRECTLY OR	NO NO