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# SCANNED AUG 2 6 2010

#### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047 2009

<b>e</b>				Under section 501(c), 527, or (except black lung be	4947(a)(1) of the I	nternal Rev	enue Code		<u> </u>		
	partmen	nt of the Treasury		► The organization may have to use a copy of this return to satisfy state reporting requirements.  Open to Public Inspection							
~ <u></u>			dar vear	or tax year beginning		9, and endin		1			
©B		of applicable	uar year,	To	, 2003	o, and endin	<u> </u>	r Identification N	umber		
		''	Please use	Christian Camps & Con	foroncos T	n.c	1		umber		
AUG	$\vdash$	Address change	IRS label or print	34 Camp Brookwoods Ro		IIC.	E Telephon	305424			
	$\vdash$	Name change	or type. See	Alton, NH 03809-9711	uu						
, <del>22</del>	-	nitial return	specific Instruc-	1112011, 1111 00003 3122			603-	<u>875-3600</u>			
ò	_    '	Termination	tions.					_			
鬘	$\sqcup'$	Amended return		<u> </u>			G Gross red		,622,456.		
3	_ <u></u>	Application pending		and address of principal officer			H(a) Is this a group return		Yes X No		
POSTWARK DATE				As C Above			H(b) Are all affiliates inclu If 'No,' attach a list (		Yes No		
<u></u>	<u>Ta</u>	x-exempt statu			4947(a)(1) or	527	•	·			
<u> ၂</u>	W	ebsite: ► WW		istiancamps.net	- A		H(c) Group exemption num	nber 🏲			
<u> </u>		m of organization	X Corpora	ration Trust Association Oth	ner► L	Year of Format	tion 1973 <b>M</b> St	ate of legal domic	ale MA		
F	Part I	Summa									
	1	Briefly descri	be the or	rganization's mission or most signifi	icant activities: _E	<u>vangeli</u>	cal and Relic	gious Mir	istry		
,	,										
ļ	234567										
į	2			if the organization discontinued its		posed of mo	ore than 25% of its a	_ 1			
ò	8 3			nbers of the governing body (Part \		. 1h\		3	11		
	2 4		•	nt voting members of the governing oyees (Part V, line 2a)	j body (Part VI, III)	ie (b) .	-	5	11 170		
	5 6			iteers (estimate if necessary)			··· -	6	1/0		
1	[ ] 7			business revenue from Part VIII, co	olumn (C) line 12	•	· ·	7a	69,806.		
				s-taxable income from Form 990-T,			}	7b	68,806.		
_			F	RECEIVED	<u></u>		Prior Year	<u> </u>	rrent Year		
	8	Contributions		202,527.							
9	9			nts (Part VIII, line 1h) (0)			183,1° 2,393,90		,164,774.		
	10	Investment in	dome (Pa	Part VIII, column (A), lines 3, 4, and	: 7d)		25, 1		10,027.		
å	11			/III, column (A), lines 5, 6d, 8c, 9c,			100,5		86,253.		
	12			mes Straugh L (must equal Part		line 12)	2,702,8		,463,581.		
_	13			nounts paid (Part IX, column (A), lir		····-/	_,,		,011,800.		
	14			members (Part IX, column (A), line	•						
	15	•		ensation, employee benefits (Part I)		es 5-10)	1,067,9	64. 1	,054,612.		
	g   16.		•	ng fees (Part IX, column (A), line 1		,		<del></del>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	is			• , , , , , , , , , , , , , , , , , , ,	•	00 205					
	ן אַ			enses (Part IX, column (D), line 25)		90,285.					
	17	•	•	IX, column (A), lines 11a-11d, 11f-	•		1,850,2		,002,360.		
	18	Total expense	es Add II	lines 13-17 (must equal Part IX, col	umn (A), line 25)		2,918,1		,068,772.		
_	19	Revenue less	expense	es. Subtract line 18 from line 12			-215,3	64.	-605,191.		
5	20 21						Beginning of Ye	ear En	d of Year		
	를 20	Total assets	(Part X, Ii	line 16).			8,486,6		,812,480.		
4 4	필 21	Total liabilitie	s (Part X	(, line 26)			628,6	03.	574,339.		
	22	Net assets or	fund bal	lances Subtract line 21 from line 2	0		7,858,00	01.  7	,238,141.		
² [ī	art II	Signati	ure Blo	ck			-				
, –		Under penaltie	s of perury.	, I declare that I have examined this return, incl e Declaration of preparer (other than officer) is	luding accompanying sci	hedules and stat	tements, and to the best of	my knowledge ar	nd belief, it is		
		true, correct, a	on complete	e Declaration of preparer (other than officer) is	based on all information	n of which prepa	arer has any knowledge	_ /			
S	ign	<b>&gt;</b> /	~	1h Jul			\ 8	3/20	/0		
H	lere	Signature	of officer				Date				
Executive Director											
		Type or pr	int name an	nd title							
						Date	Check if	Preparer's id	lentifying number ions)		
	aid	Preparer's		- '			self- employed ►		•		
	re-	Preparer's signature	<b></b>	, <del>, , , , , , , , , , , , , , , , , , </del>		7.29.	10	N/A			
P	arer's	Firm's name (i	or Rob	pert G. Stimson Co., Po	7						
	ise Inly	yours if self- ` employed),	~~~	1 Pleasant Street	·- ·		EIN ► N	/A			
•	, iiiy	address, and ZIP + 4		conia, NH 03246	<del></del>				4-0940		
_ M	lav the			with the preparer shown above? (s	see instructions)				es No		
<u> </u>				much Reduction Act Notice see the					osm <b>990</b> (2009)		

_	1990(2009) Christian Camps & Conferences, Inc.	23-7305424	Page 2
Par	t III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:		
	Evangelical and Religious Ministry		
	2109511011 0111 1011 1011 1111 1111 1111		
2	Did the organization undertake any significant program services during the year which were not listed on the	prior	
	Form 990 or 990-EZ?	Yes	X No
	If 'Yes,' describe these new services on Schedule O.		<b>-</b>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s? Tyes	X No
•		.s	<u> </u>
_	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 and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all	expenses. Section 50	1(c)(3)
	expenses, and revenue, if any, for each program service reported	iocations to others, the	totai
		<del></del>	<del></del>
4 a	(Code (Code) (Expenses \$ 1,186,819. including grants of \$ ) (Rev	renue \$	)
	Summer Camp - approx 750 - 850 campers	•	
	Children ages 8 - 18 are presented with the Gospel of Jesus Christ	which includes	
	Dibla study and abbrevious series with the dosper of vesus christ	MILITOIL THETTERS	
	Bible study and other camp activities.		
		4	
4 t	(Code:) (Expenses \$ 1,011,800. including grants of \$ 1,011,800.) (Rev		)
	Managerial Assistance & Donations of land and buildings to Related		<u>t</u>
	Organization to assist in their mission of Evangelical & Religious	Ministry.	
		<b></b>	
4	: (Code (Cod	venue Š	١
	Conferences & Retreats - approx 70 groups (Approximately 4,500 peop		—— <i>′</i>
	Groups, which include teens and adults, seek to get away for Spirit	<u>ual retreat an</u>	₫
	Bible study.		
		<b>_</b>	
	,		
		- <b></b>	
	Other program services (Describe in Schedule O )	<del></del> .	
70		`	
		<i></i>	
46	e Total program service expenses ► 2,718,441.		

**Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A. Is the organization required to complete Schedule B, Schedule of Contributors? 2 X 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 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х 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 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I 6 X Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 X Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D. Part IV 9 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? I 'Yes,' complete Schedule D, Part V X 10 11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X 11 X as applicable • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII • Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes,' complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If 'Yes,' complete Schedule F, Part I* 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II. 15 Х 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Х complete Schedule G, Part III. 19

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

Х

20

Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II. 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х Schedule 1 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 **24**a X **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х b is the organization 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 'Yes,' complete Schedule L, Part l 25b X 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 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete X Schedule L, Part III 27 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L, Part IV. **c** An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M ... 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If 'Yes,' complete Schedule M Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If Yes, complete Schedule R, Part I33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 Х Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Х 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 37 X

BAA Form 990 (2009)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

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		Yes	No				
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S			Ī				
Information Returns. Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1 b  1 b							
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c						
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return							
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	Х					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)							
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	х					
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь	Χ					
4a 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)?							
<b>b</b> if 'Yes,' enter the name of the foreign country: ▶			1				
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		_X_				
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5Ь		Χ				
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?							
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?							
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?							
7 Organizations that may receive deductible contributions under section 170(c).							
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services							
provided to the payor?	7a		X				
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b						
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		X				
d If 'Yes,' indicate the number of Forms 8282 filed during the year							
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х				
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_7f		X				
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		ļ				
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h		ļ				
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8						
9 Sponsoring organizations maintaining donor advised funds.	-						
a Did the organization make any taxable distributions under section 4966?	9a						
b Did the organization make any distribution to a donor, donor advisor, or related person?	9 b						
10 Section 501(c)(7) organizations. Enter:							
a Initiation fees and capital contributions included on Part VIII, line 12 . 10a							
<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	:		1				
11 Section 501(c)(12) organizations. Enter							
a Gross income from other members or shareholders			;				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).							
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b							

**BAA** Form **990** (2009)

Form 990 (2009) Christian Camps & Conferences, Inc. 23-7305424 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. S

ie:	ection A. Governing Body and Management						
			Yes	No			
1	a Enter the number of voting members of the governing body  1a 13						
	<b>b</b> Enter the number of voting members that are independent .	]					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? See Schedule 0	2	X				
3	<ul> <li>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?</li> <li>Did the organization make any significant changes to its organizational documents</li> </ul>						
4	4 Did the organization make any significant changes to its organizational documents						
	since the prior Form 990 was filed?						
5	5 Did the organization become aware during the year of a material diversion of the organization's assets?						
6	6 Does the organization have members or stockholders?						
7	7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Х			
	<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
	a The governing body?	8a	X				
	<b>b</b> Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х			
ъe	ection B. Policies (This Section B requests information about policies not required by the Interna	I					
₹ <u>e</u> ı	venue Code.)						
			Yes				
10	a Does the organization have local chapters, branches, or affiliates?	10a		X			
		1	1	ı			

Revenue Code.)					
	-		Yes	No	
10a Does the organization have local chapters, branches, or affiliates?		10 a		X	
b If 'Yes,' does the organization have written policies and procedures govern and branches to ensure their operations are consistent with those of the or	ng the activities of such chapters, affiliates, ganization?	10b			
11 Has the organization provided a copy of this Form 990 to all members of its	governing body before filing the form?	11	Х		
11 A Describe in Schedule O the process, if any, used by the organization to rev					
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13.					
<b>b</b> Are officers, directors or trustees, and key employees required to disclose to conflicts?	annually interests that could give rise	12b	х		
c Does the organization regularly and consistently monitor and enforce comp Schedule O how this is done See Schedule O	liance with the policy? If 'Yes,' describe in	12c			
13 Does the organization have a written whistleblower policy? .	<u>L</u>	13	Х		
14 Does the organization have a written document retention and destruction p	olicy?	14	Х		
15 Did the process for determining compensation of the following persons includes persons, comparability data, and contemporaneous substantiation of the de-	ude a review and approval by independent eliberation and decision?				
a The organization's CEO, Executive Director, or top management official		15a	X	_	
<b>b</b> Other officers of key employees of the organization See Schedule		15b	Х		
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instruc					
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint entity during the year?	venture or similar arrangement with a taxable -	16a		Х	
<b>b</b> If 'Yes,' has the organization adopted a written policy or procedure requiring in joint venture arrangements under applicable federal tax law, and taken s	steps to safeguard the organization's exempt  -	16b			
status with respect to such arrangements?  Section C. Disclosures		100			
	None				
17 List the states with which a copy of this Form 990 is required to be filed >					
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if a	pplicable), 990, and 990-T (501(c)(3)s only) ava	aılabl	e for p	oublic	

inspection. Indicate how you make these available Check all that apply. X Upon request Another's website

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► Robert M. Strodel 34 Camp Brookwoods Road, Alton, NH 03809 (603) 875-3600

## 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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees See instructions for definition of 'key employees'
- 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 compensate any current officer, director, or trustee											
(A)	(B)	(c)				(D)	(E)	(F)			
Name and Title	Average hours		_	_	_	hat appl		Reportable compensation from	Reportable compensation from	Estimated amount of other	
	per week	Individual trustee or director	Institutional trust	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization	
		ual tr	ional		nploy	t cor				and related organizations	
		uste	trus		ee	npen	1			·	
		"	tee			sated					
Peter C. Bennett											
Secretary	10	Х		Χ				0.	0.	0.	
George F. Bennett, Jr.											
Chairman	10	X		Х				0.	0.	0.	
William Voge	_										
Director	2	Х				ļ		0.	0.	0.	
Robert M. Strodel	_										
President	50	X	<u> </u>	Х	Х		_	105,112.	0.	25,205.	
Kathy Vaselkiv	_		İ								
Director	2	X	<u> </u>				_	0.	0.	0.	
Lisa Bennett Forkner	_										
Director	2	X	<u> </u>				<u> </u>	0.	0.	0.	
Robert B. Bennett	_	1						_	_	_	
Director	2	X		Х				0.	0.	0.	
Cheryl Crawford	<b>」</b>								_	_	
Director	2	X		L.,	_			0.	0.	0.	
Todd Blount	┧ .					ł			_	_	
Director	2	Х	ļ		_		_	0.	0.	0.	
David R. Bass		l								_	
Director	2	X	_				_	0.	0.	0.	
George Veth		l		١						_	
Treasurer	2	X	-	X	<u> </u>		_	0.	0.	0.	
Steven R. Aldridge		1			ŀ	l			_		
Food Service Direc	30	<u> </u>	<u> </u>	<u> </u>	<u> </u>	Х	_	44,825.	0.	9,749.	
Melissa C. Yonan	٠.,			İ			İ	56.556	•	7 165	
Dir Alumni & De	40_	├	-	<u> </u>	<u> </u>	X	├-	56,656.	0.	7,165.	
Craig Boronow	٠,					١,,		55 000	0	10 004	
Assoc Dir of Camp	40	-	├—		-	X	-	55,000.	0.	10,004.	
David_Gleason	- 4					.,		45 217	_	0 005	
Facility Director	40	1	$\vdash$			X	⊢	45,317.	0.	9,085.	
George Bowling	- 40					U		47 000		10 065	
Director of Confer	40	<del> </del>	$\vdash$	$\vdash$	<u> </u>	X	├	47,808.	0.	19,865.	
	4										
		<u> </u>		<u> </u>			Щ.	J	L		

Par	t VIII Statement of Revenue					
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
5,0	1a Federated campaigns 1a				<u></u>	
ANT	b Membership dues 1b					
8	c Fundraising events 1c					
IFTS ARA	d Related organizations 1 d					
S,	e Government grants (contributions). 1e		<del></del>			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f	222 525	1			
죑		202,527.				
동일	g Noncash contribns included in lns 1a-1f: \$					1
3 4	h Total. Add lines 1a-1f.		202,527.			
¥	O Common Food	Business Code	1 662 164	1 662 164	~ <del></del>	ļ
Ĕ	2a Camper Fees		1,663,164.	1,663,164.	<u> </u>	
<u>۾</u>	b Conferences & Retreats		501,610.	501,610.		<del></del>
ž	c Management Income				<del></del>	<del> </del>
1 SE	d		<u>-</u>		<del> </del>	
Z	e				· · · ·	<del> </del>
စ္က	f All other program service revenue	<b></b>	2 164 774			· · · · · · · · · · · · · · · · · · ·
-	g Total. Add lines 2a-2f	<del></del>	2,164,774.			
	3 Investment income (including dividend other similar amounts).	s, interest and	9,150.			9,150.
	4 Income from investment of tax-exemp	t bond proceeds	3,200.		<del> </del>	3/200.
	5 Royalties	bona proceeds				_
	(i) Real	(II) Personal				
	6a Gross Rents	· ·				
	<b>b</b> Less: rental expenses					
	c Rental income or (loss)		18			
	d Net rental income or (loss).	<b>•</b>		<del></del>		
	7a Gross amount from sales of (i) Securities	(II) Other				
	assets other than inventory	4,460.				
	<b>b</b> Less. cost or other basis					
	and sales expenses	3,583.				]
	c Gain or (loss)	877.				
	d Net gain or (loss)	<b>•</b>	877.			877.
ш	8a Gross income from fundraising events					
OTHER REVENUE	(not including \$					
_₫	of contributions reported on line 1c)					
8	See Part IV, line 18	a				
6	<ul><li>b Less: direct expenses</li><li>c Net income or (loss) from fundraising</li></ul>	ovents >				<del> </del>
	, ,	events				1
	9a Gross income from gaming activities See Part IV, line 19	а				
	<b>b</b> Less: direct expenses	b				
	c Net income or (loss) from gaming acti	vities				
	10a Gross sales of inventory, less returns and allowances	a 228,095.				
	<b>b</b> Less. cost of goods sold	b 155,292.				
	c Net income or (loss) from sales of inve		72,803.		69,806.	2,997.
	Miscellaneous Revenue	Business Code	72,005.		03,000.	2,33,.
	11a Insurance Claim Income		13,178.	13,178.		1
	b Miscellaneous Income	<del></del>	272.	272.		<u> </u>
	c		<del></del>			
	d All other revenue.	-	-	,		
	e Total. Add lines 11a-11d	<b>&gt;</b>	13,450.			
	12 Total revenue. See instructions	<b>_ &gt;</b>	2,463,581.	2,178,224.	69,806.	13,024.

All other organizations must com	plete column (A) but ar	e not required to comple	ete columns (B), (C), ar	ıd (D).

		<del></del>			
Do 1 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,011,800.	1,011,800.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	2/02/2/0003	1/021/0001		
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	225,768.	0.	157,781.	67,987.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in	0.	0.	0.	0.
_	section 4958(c)(3)(B)	610,750.		-	
7	Other salaries and wages	610,730.	559,163.	51,587.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	33,138.	13,103.	14,100.	5,935.
9	Other employee benefits	121,076.	63,649.	54,965.	2,462.
10	Payroll taxes	63,880.	43,949.	14,711.	5,220.
	Fees for services (non-employees)	_03,000.	30, J3J.	14,111.	3,220.
11	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	<u>-</u>		<u>.</u>	<u> </u>
	Management	492.	· · · · · · · · · · · · · · · · · · ·	492.	
	Legal	12,836.	444.	12,392.	
	Accounting	12,030.	444.	12,392.	
	Lobbying		,		
	e Prof fundraising svcs. See Part IV, In 17				
	Investment management fees	14 104	C C10	7.405	
	g Other	14,104.	6,619.	7,485.	<u> </u>
	Advertising and promotion	2,989.	1,989.	1,000.	455
13	Office expenses	18,332.	17,262.	615.	455.
14	Information technology	2,300.	2,180.		120.
15	Royalties				*
16	Occupancy	108,639.	108,639.		
17	Travel	75,390.	73,950.	629.	811.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,043.	2,432.		611.
20	Interest	26,734.	26,734.		
21	Payments to affiliates				
22		124,103.	124,103.		
23	Insurance	95,451.	83,210.	10,667.	1,574.
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)				
á	Food Supplies	270,000.	270,000.		
	Supplies - Program	113,302.	113,302.		
	Scholarships-Campers	97,608.	97,608.		
	Scholarships-Staff	55,760.	55,760.		
	Supplies - Mtnce	44,025.	44,025.		
	All other expenses	-62,748.	-1,480.	-66,378.	5,110.
	Total functional expenses. Add lines 1 through 24f	3,068,772.	2,718,441.	260,046.	90,285.
26					
BAA	<u> </u>			•	Form <b>990</b> (2009)

Balance Sheet

(B) End of year (A) Beginning of year 47,210. 40,452. Cash - non-interest-bearing 1 179,694. 2 466,404. 2 Savings and temporary cash investments 1,000. Pledges and grants receivable, net 3 3 Accounts receivable, net 36,524. 4 20,935. Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 9,786. 8 10,684. Inventories for sale or use 23,951. 13,893. 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. 10a 9,544,617 Complete Part VI of Schedule D 10b 2,476,260 8,126,693. 7,068,357. **b** Less: accumulated depreciation 10c 1,009. 11 Investments - publicly-traded securities 11 1.333. 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 61,737. 15 189,422. 7,812,480. 8,486,604. 16 Total assets Add lines 1 through 15 (must equal line 34) 16 52,354. 44,001 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 388,038. 23 378,532. 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 188,211 151,806. 25 25 Other liabilities Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 628,603. 26 574,339. X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 7,828,764. 27 7,223,141. 27 Unrestricted net assets 29,237. 15,000. 28 Temporarily restricted net assets 28 29 Permanently restricted net assets R Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 7,858,001. 33 7,238,141. 33 Total net assets or fund balances... 8,486,604. 34 7,812,480. Total liabilities and net assets/fund balances Form 990 (2009) BAA

TEEA0111L 01/30/10

Form <b>990</b> (2009) Christian Camps & Conferences, Inc.	23-7305424		Pa	ige 12
Part XI Financial Statements and Reporting	· <u>-</u> · · · ·			
			Yes	No
1 Accounting method used to prepare the Form 990:  Cash X Accrual Other				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	. L	2a		X
b Were the organization's financial statements audited by an independent accountant?	. [	2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversifieries, or compilation of its financial statements and selection of an independent accountant?	ght of the audit,	2c		Х
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	ın =			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we consolidated basis, separate basis, or both:	ere issued on a			
Separate basis Consolidated basis Both consolidated and separate basis	<u> </u>			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	in the Single	3a		Х
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	the required audit	3b		

BAA

Form **990** (2009)

### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name o	lame of the organization Employer identification number										
	istian Camps &								30542	4	
Part	I Reason for Pul	blic Charity Statu	s (All organizations	must d	comple	te this	part.)	See i	nstruct	ions	
The o	rganization is not a priv	vate foundation becau	ise it is: (For lines 1 thro	ugh 11,	check o	nly one	box)				
1	A church, convention	on of churches or ass	ociation of churches des	cribed in	section	n 170(b)	(1)(A)(i)				
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's										
	name, city, and state:										
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)										
6 7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8			170(b)(1)(A)(vi). (Comple	te Part I	l)						
9	from activities related investment income June 30, 1975. See	d to its exempt function and unrelated busine section <b>509(a)(2).</b> (C		eptions, a section	and (2) r 511 tax)	no more i	than 33- usiness	1/3 % of es acqui	ite sunn	ort from arose	n after
10			exclusively to test for pu		-						
11	An organization or	ganized and operated orted organizations d of supporting organiz	exclusively for the bene- lescribed in section 509( zation and complete lines	fit of, to a)(1) or s 11e thi	perform section rough 1	the fun 509(a)(2 Ih.	ictions ( 2). See	of, or ca section	rry out ti <b>509(a)(</b> 3	he purposes o 3). Check the	f one or box that
	a Type I	<b>b</b> Type II	<b>c</b> ☐ Type II						d 🗍	Type III- Ot	
е	By checking this both than foundation ma 509(a)(2).	ox, I certify that the or inagers and other tha	ganization is not control n one or more publicly s	led direc upportec	tly or in	directly zations	by one describe	or more ed in sec	disqual ction 509	ified persons 9(a)(1) or sect	other ion
f	If the organization check this box	received a written det	ermination from the IRS	that is a	Type I	, Type II	or Typ	e III sup	porting	organization,	
g	Since August 17, 2	006, has the organiza	tion accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	s?	
										Y	es No
	(i) a person who	directly or indirectly of the si	controls, either alone or upported organization?	together	with pe	ersons d	escribe	d in (ii) i	and (III)	11 g (i)	
	-	ber of a person desc								11 g (ii)	+-
	• • • • •	•	described in (i) or (ii) a	hove?						11 g (iii)	+-
h		-	the supported organization							119(11)	
<del></del>	(i) Name of Supported	(ii) EIN	(iii) Type of organization		s the	(A) Did v	ou notify	(6)	s the	(vii) Amount of	Support
	Organization	(1) 2	(described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed gove	ion in col d in your rning ment?	the organ	nization în (i) of	organizat	ion in col zed in the	(VII) Amount or	Зирроп
				Yes	No	Yes	No	Yes	No		
			<u> </u>								
								<del></del>		- · · · · ·	
										<del></del>	
Total											

<u>Par</u>	t II Support Schedule for				(b)(1)(A)(iv) an	d 170(b)(1)(A)(	vi)
<u></u>	(Complete only if you check	ed the box on line	e 5, 7, or 8 of Par	t I.)	<del></del>		
Cale	tion A. Public Support  Indar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
•	nning in) ► Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')						
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
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						
Sec	tion B. Total Support	•		ť		1	
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	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.						
12	Gross receipts from related activ	vities, etc. (see in:	structions)			12	
13	First five years. If the Form 990 organization, check this box and	ıs for the organız İstop here	ation's first, seco	nd, third, fourth,	or fifth tax year as	s a section 501(c)(	3) ▶ □
	tion C. Computation of Pu						
	Public support percentage for 20	•	•	ne 11, column (f)		14	<u>%</u>
15	Public support percentage from	2008 Schedule A,	, Part II, line 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, ch	eck this box ►
ŧ	33-1/3 support test - 2008. If the and stop here. The organization	e organization did qualifies as a pul	d not check a box blicly supported o	on line 13, or 16. rganization.	a, and line 15 is 3	3-1/3% or more, ch	neck this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	re. Explain in Part	IV how
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	re. Explain in Part	
18	Private foundation. If the organ		_		-	-	structions -
BAA						hedule A (Form 99	

23-7305424

Page 2

Schedule A (Form 990 or 990-EZ) 2009 Christian Camps & Conferences, Inc.

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)

	tion A. Public Support						
	dar year (or fiscal yr beginning in)►	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	342,614.	908,634.	592,677.	183,172.	202,527.	2,229,624.
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	1.919.201.	2,060,500.	2.376.422.	2,693,883.	2.392.869.	11,442,875.
3	Gross receipts from activities that are not an unrelated trade or business under section 513					2,032,003.	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	2,261,815.	2,969,134.	2,969,099.	2,877,055.	2,595,396.	13,672,499.
7a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
_			<u> </u>	<u></u>	<u> </u>	0.	· ·
٥	<b>Public support</b> (Subtract line 7c from line 6)		<u></u>	<u> </u>			13,672,499.
Sec	tion B. Total Support	<u>.                                    </u>			<u> </u>	<del></del>	15,012,455.
	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6		2,969,134.		2,877,055.		
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	52,388.	126,740.	8,727.	6,999.	9,150.	
b				0,121.	0,555.	5,150.	204,004.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						0.
	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	52,388.	126,740.	8,727.	6,999.	9,150.	
11	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			8,727.	6,999.	9,150.	
11	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.). See Part IV.			8,727. 9,052.	6,999. 2,905.	9,150.	0. 188,076.
11 12 13	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.) See Part IV.  Total support. (add lins 9, 10c, 11, and 12)	52,388. 152,057.	126,740. 10,617.	9,052.	2,905.	13,445.	0. 188,076. 14,064,579.
11 12 13 14	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.) See Part IV  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and	52,388.  152,057.  Is for the organiz stop here	126,740.  10,617.  ation's first, seco	9,052.	2,905.	13,445.	0. 188,076. 14,064,579.
11 12 13 14 Sec	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.) See 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	52,388.  152,057.  Is for the organiz stop here  blic Support F	126,740.  10,617.  ation's first, seco	9,052. nd, third, fourth,	2,905. or fifth tax year a	13,445.	0. 188,076. 14,064,579.
11 12 13 14 Sec 15	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.) See Part IV.  Total support. (add ins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	52,388.  152,057.  Is for the organiz stop here  blic Support F  009 (line 8, colum	126,740.  10,617.  ation's first, seco	9,052. nd, third, fourth,	2,905. or fifth tax year a	13,445 .s a section 501(c	0. 188,076. 14,064,579. (3) ►
11 12 13 14 Sec: 15 16	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.) See 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	52,388.  152,057.  Is for the organiz stop here  blic Support F  009 (line 8, colum 2008 Schedule A)	126, 740.  10, 617.  ation's first, seco  Percentage  n (f) divided by lift Part III, line 15	9,052.  nd, third, fourth,  ne 13, column (f))	2,905. or fifth tax year a	13,445 s a section 501(c	0. 188,076. 14,064,579. □ 97.2%
11 12 13 14 Sec 15 16 Sec	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.) See 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 for 20  Public support percentage from	152, 388.  152, 057.  Is for the organized stop here  blic Support Foog (line 8, column 2008 Schedule A, restment Incolumn 2008 Schedule A, restment 2008 Schedule A, re	126,740.  10,617.  ation's first, seco Percentage  n (f) divided by lift Part III, line 15 me Percentage	9,052. nd, third, fourth, ne 13, column (f))	2,905. or fifth tax year a	13,445 s a section 501(c	0. 188,076. 14,064,579. □ 97.2%
11 12 13 14 Sec 15 16 Sec 17	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.). See 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 ton D. Computation of Invitor D. Computation of Invitor 10a properties and 10a properties are propertied.	152, 057.  Is for the organized stop here  blic Support Form 1009 (line 8, column 2008 Schedule A, restment Incomport 2009 (line 10c, or 2009 (lin	126,740.  10,617.  ation's first, seco Percentage  n (f) divided by lift Part III, line 15  me Percentage  column (f) divided	9,052.  nd, third, fourth,  ne 13, column (f))  e ed by line 13, column	2,905. or fifth tax year a	13, 445s a section 501(c	204,004. 0. 188,076. 14,064,579. ⇒ □ 97.2% 97.0%
11 12 13 14 Sec 15 16 Sec 17 18 19a	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.) See 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 those support percentage from the support percentage from the support percentage from the support percentage from the support percentage from the support percentage from the support percentage from the support percentage from the support tests – 2009. If the more than 33-1/3%, check this beautiful to the support tests – 2009. If the more than 33-1/3%, check this beautiful to the support tests – 2009.	152, 057.  Is for the organized stop here  blic Support Form 2008 Schedule Agrestment Incomposition 2009 (line 10c, from 2008 Schedule Agrestment stop here)  The companization did not one and stop here	126,740.  10,617.  ation's first, seco Percentage In (f) divided by lift Part III, line 15 INTERPREDICT OF COLUMN (f) divided by lift Interpredict of the property of the column (f) divided by lift A, Part III, lined the check the box on the organization.	9,052.  nd, third, fourth,  ne 13, column (f))  e ed by line 13, column (f)  17 line 14, and line 15 n qualifies as a pi	2,905. or fifth tax year a	13, 445. s a section 501(c  . 15 16  17 18 1%, and line 17 is rorganization	0.  188,076.  14,064,579.  203  ▶ □  97.2 %  97.0 %  1.5 %  1.6 %
11 12 13 14 Sec 15 16 Sec 17 18 19a	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.) See 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 thore. The properties of the pro	152, 057.  Is for the organized stop here  blic Support Form 2008 Schedule Agrestment Incomposed for 2009 (line 10c, from 2008 Schedule Agrestment stop here organization did not book and stop here organization did this box and stop stop here organization did this box and stop here orga	126,740.  10,617.  ation's first, seco  Percentage  In (f) divided by lift Part III, line 15  IN Percentage  column (f) divided by lift column (f) divided b	9,052.  nd, third, fourth,  ne 13, column (f))  e ed by line 13, column (f)  in 17  line 14, and line 15  n qualifies as a pi  x on line 14 or 19  nization qualifies a	2,905. or fifth tax year a  imn (f)) is more than 33-1/3 iblicly supported ia, and line 16 is it is as a publicly supp	13, 445 s a section 501(c  15 16  17 18 i%, and line 17 is rorganization more than 33-1/3 orted organization	204,004.  0.  188,076.  14,064,579.  2)(3)  ▶ □  97.2 %  97.0 %  1.5 %  1.6 %  not  ▶ X  %, and line 18  on

Schedule A	(Form	990 or	990-EZ)	2009	Cnr:	<u>istia</u>	n ca	mps	& COI	<u>nrere</u>	ences,	inc.		23-730	15424		Page 4
Part IV	Supp	lemen	tal Info	ormati	ion. C	omple	te th	is par	t to pi	rovide	the ex	xplanatio additiona	ns requ	ured by	Part II,	line 10;	
	Part	II, IIne	1/a or	1/b;	and F	art III	, line	12. F	rovia	e any	otner	additiona	intorr	nation.	See inst	ructions	<u></u>
				•													
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#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name	of the organization	·			Employer to	lentification	number	
Chr	ristian Camps & Conferences, I	nc.						
					23-730	5424		_
Par	t I Organizations Maintaining Dono	Advised Funds or Other	Similar Fund	s or Acco	ounts Co	mplete	if	
	the organization answered 'Yes' t	o Form 990, Part IV, line 6	ò.			·		
		(a) Donor advised fur	nds	<b>(b)</b> Ft	unds and	other acc	ounts	
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year).							
4	Aggregate value at end of year							
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the as to the organization's exclusive le	ssets held in dor egal control?	nor advised		Yes	<b></b> 1	No
6	Did the organization inform all grantees, dono	rs, and donor advisors in writing	that grant funds	s may be				
	used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor afit??	advisor or for a	any other	Г	Yes		No
Par	t II Conservation Easements Comple		vered 'Ves' to	Serm 90	n Part I			<del></del> -
	Purpose(s) of conservation easements held by			<u> </u>	o, raiti	v, iiie	<del>/</del>	
'	Preservation of land for public use (e.g., r	_	Preservation of	an historica	ally import	ant land	araa	
	Protection of natural habitat	ecreation of pleasure)	Preservation of				area	
	Preservation of open space		jr reservation of	certified fils	storic struc	luie		
2		on held a gualified conservation	contribution in t	he form of s	concenta	ition ease	ment c	on the
2	last day of the tax year	on held a qualified conservation	contribution in t	ile ioilii oi a	CONSCIVA	illoir ease	inent o	ni tile
					Held at th	ne End of	the Ye	ar
ā	Total number of conservation easements			2a				
ŀ	Total acreage restricted by conservation ease	ments		2b				
(	Number of conservation easements on a certi	fied historic structure included in	(a)	2c				
•	Number of conservation easements included i	n (c) acquired after 8/17/06		2d				
3	Number of conservation easements modified,	transferred, released, extinguish	ied, or terminate	ed by the org	ganızatıon	during th	ie tax	
	year ►							
4	Number of states where property subject to co	onservation easement is located	<b>-</b>	_				
5	Does the organization have a written policy re and enforcement of the conservation easemen	garding the periodic monitoring, nt it holds?	inspection, han	dling of viola	ations,	Yes	□ I	No
6	Staff and volunteer hours devoted to monitoring the year ▶						_	
7	during the year ►			\$ <u></u>	<del></del>		_	
8	Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requ	urements of sec	tion		Yes		No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements	s conservation easements in its rev to the organization's financial sta	renue and expens atements that de	se statement, escribes the	and balan organizati	ce sheet, on's acco	and ounting	for
Pai	rt III Organizations Maintaining Colle	ctions of Art. Historical Tr	reasures, or	Other Sim	ilar Ass	ets		
	Complete if the organization ans	wered 'Yes' to Form 990, F	Part IV, line 8	3.				
1 a	a If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial statement	lic exhibition, education, or resea	evenue stateme arch in furtherar	nt and balar	nce sheet service, p	works of provide, i	art, his n Part )	itorical XIV,
ŀ	If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items:	r SFAS 116, to report in its rever lic exhibition, education, or resea	nue statement a arch in furtherar	ind balance nce of public	sheet work service, p	ks of art, provide th	historic ie follov	cal wing
	(i) Revenues included in Form 990, Part VIII,	line 1		•	►\$ <sub>.</sub>			
	(ii) Assets included in Form 990, Part X				<b>►</b> \$			
2	If the organization received or held works of a amounts required to be reported under SFAS	ert, historical treasures, or other s 116 relating to these items:	sımılar assets fo	or financial g	jain, provid	de the fol	lowing	
á	a Revenues included in Form 990, Part VIII, line				. ▶\$			

**b** Assets included in Form 990, Part X

Schedule D (Form 990) 2009 CITL 13				23-730.		Page Z
Part III Organizations Mainta	ining Collections	s of Art, Histo	rical Treasures, or	<b>Other Similar Ass</b>	ets (contin	ued)
3 Using the organization's acquisition items (check all that apply):	ion accession and ot	her records, chec	k any of the following to	hat are a significant us	e of its collec	tion
a Public exhibition		<b>d</b> Loan d	or exchange programs			
<b>b</b> Scholarly research		e 🗌 Other		<del></del>		
c Preservation for future gener	rations					
4 Provide a description of the orga Part XIV	nization's collections	and explain how	they further the organi	zation's exempt purpos	se in	
5 During the year, did the organiza assets to be sold to raise funds r					Yes	No_
Part IV Escrow and Custodia 9, or reported an amo				ed 'Yes' to Form 99	90, Part IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian, or of	ther intermediary	for contributions or othe	er assets not	Yes	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and con	nplete the following	ng table:		Amount	<del></del>
<b>c</b> Beginning balance .				1 c	7 70 2.11	
d Additions during the year	,	•		1 d	**	
e Distributions during the year				1e		
f Ending balance .				1f	-	
2a Did the organization include an a	amount on Form 990,	Part X, line 21?			Yes	No
<b>b</b> If 'Yes,' explain the arrangement		,		•		ш
Part V Endowment Funds Co		ation answere	ed 'Yes' to Form 99	0, Part IV, line 10.		
	(a) Current year	(b) Prior year			(e) Four year	ars back
1 a Beginning of year balance						
<b>b</b> Contributions.						
c Net Investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance.						
2 Provide the estimated percentag	e of the year end ba	lance held as:				
a Board designated or quasi-endov	wment ►	<u> </u>				
<b>b</b> Permanent endowment ▶	<u> </u>					
c Term endowment ►	<b>%</b>					
3a Are there endowment funds not organization by:	in the possession of	the organization	that are held and admir	nistered for the	Yes	No
(i) unrelated organizations					3a(i)	1
(ii) related organizations .				•	3a(ii)	1
<b>b</b> If 'Yes' to 3a(ii), are the related of	organizations listed a	as required on Sc	hedule R?		3b	<del>                                     </del>
4 Describe in Part XIV the intender	=				· · · · · · · · · · · · · · · · · · ·	
Part VI Investments-Land, B				line 10.		
Description of investment	t (a) Cos	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book \	/alue
1 a Land			4,855,695.		4,855	5,695.
<b>b</b> Buildings			4,116,257.	1,539,500.		5,757.
c Leasehold improvements			54,777.	39,451.	15	5,326.
<b>d</b> Equipment			517,888.	415,936.		1,952.
e Other				481,373.		1,373.
Total. Add lines 1a through 1e (Column	nn (d) must equal Foi	rm 990, Part X, c	olumn (B), line 10(c).)	<b>•</b>		3,357.
BAA				Sched	ule <b>D</b> (Form <sup>Q</sup>	190) 2009

Schedule D (Form 990) 2009 Christian Camps  Part VII Investments—Other Securities See			Page
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security) Financial derivatives	<del></del>	Cost or end-of-year market value	
Closely-held equity interests .	<del></del>		
Other			
	-		
			_
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)			
Part VIII Investments-Program Related (See		13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
	<del>                                     </del>	Cost or end-of-year market value	
	<del>                                     </del>		
	<del>                                     </del>		
		11	
		•	
	1		
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)	-		
Part IX Other Assets (See Form 990, Part X	(, line 15) N/A		
(a)	Description	(b) Book v	/alue
		****	
The state of the s			
<u> </u>			
	<del></del>		
		<b>•</b>	
Total (Column (b) must squal form 000 Post V (C)	Inc. 15)		
Total. (Column (b) must equal Form 990, Part X, col (B)			
Part X Other Liabilities (See Form 990, Part	rt X, line 25)		
Part X Other Liabilities (See Form 990, Part X (a) Description of Liability			
(a) Description of Liability Federal Income Taxes	rt X, line 25) (b) Amount		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation	rt X, line 25)  (b) Amount  64,422.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation	rt X, line 25)  (b) Amount  64,422.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		
Part X Other Liabilities (See Form 990, Part A) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability  Federal Income Taxes  Deferred Compensation  State Payroll Taxes	rt X, line 25) (b) Amount 64, 422. 1, 233.		

Sche	edule <b>D</b> (Form 990) 2009 Christian Camps & Conferences, Inc.	23-730	)5424	Page <b>4</b>
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	5	N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year Subtract line 2 from line 1 .			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	N/A	
	Total revenue, gains, and other support per audited financial statements	1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·	
	Net unrealized gains on investments . 2a			
	Donated services and use of facilities 2b			
	Recoveries of prior year grants	$\neg$		
	I Other (Describe in Part XIV)			
	Add lines 2a through 2d	2e		
	Subtract line 2e from line 1	3		
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3		
٠,				
	Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	17 / 3	····.
	t XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses	per Kett	Irn N/A	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities 2a			
t	Prior year adjustments 2b			
(	Other losses 2c			
C	Other (Describe in Part XIV)			
•	Add lines 2a through 2d	2e		
3	Subtract line <b>2e</b> from line <b>1</b>	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV) .			
(	Add lines 4a and 4b.	4c		
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5		
Par	t XIV   Supplemental Information	<u> </u>	<u> </u>	
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete th mation	rt IV, lines is part to p	1b and 2b, provide any a	Part V, additional
		<del>-</del>		

Schedule D (Form 990) 2009 Christian Camps & Conferences, Part XIV   Supplemental Information (continued)	Inc.	23-7305424 Pag	ge <b>5</b>
			<del></del> -
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			<b>-</b> -
			· <b>_</b> _
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			· <b>–</b> –
			· <b>–</b> –
			· <b>–</b> –

# SCHEDULE I

Department of the Treasury Internal Revenue Service

Governments and Individuals in the United States Grants and Other Assistance to Organizations,

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

2009

OMB No 1545-0047

Open to Public Inspection

Center in Maine - Related Party **ջ** □ (h) Purpose of grant or assistance **A** Conference Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form Organizat X Yes Employer identification number Camps & 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 23-7305424 of In-Kind Mgmt | Inventory, Mgmt | Land, Buildings, (g) Description of non-cash assistance Services 1 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 criteria used to award the grants or assistance? land/blgs, Cost (f) Method of valuation (book, FMV, appraisal, other) Cost Basis for 1,011,800. Services See Part IV (e) Amount of non-cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 0. (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable 501 (c) (3) Part I General Information on Grants and Assistance (P) EIN Christian Camps & Conferences, Christian Camps & Conferences, M 1 (a) Name and address of organization or government Moose River, ME 04945 11111111 Heald Pond Road Name of the organization Ì

Schedule 1 (Form 990) 2009

TEEA3901L 02/10/10

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

Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

Page Z Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. 23-7305424 Christian Camps & Conferences, Schedule I (Form 990) 2009

Part III

Schedule I (Form 990) 2009 (f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) \_\_\_necessary.\_ Donated Land & Buildings to Related Party Organization - no monitoring \_\_\_Provided Management Services to Related Party Organization. No monitoring deemed (d) Amount of non-cash assistance (c) Amount of cash grant Part I, Line 2 - Grantmaker's Description of How Grants are Used (b) Number of recipients (a) Type of grant or assistance \_\_deemed\_necessary.\_ BAA

#### SCHEDULE O (Form 990)

#### **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

Christian Camps & Conferences, Inc.	23-7305424
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Director	
Robert Strodel, Executive Director and Deborah Strodel, Bookkee	
Form 990, Part VI, Line 11 - Form 990 Review Process	
Board of Directors review of 990 and 990-T at annual meeting pr	rior to the filing of
the tax return.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Cor	ıflicts
Board of Directors review the policy annually and individual bo	pard members
acknowledge review of the policy. Employees also have a policy	and reviewed
annually.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, E	xec. Dir., or Top Mgtment
Board Of Directors review and approve key employee salaries and	l approve the budget
for changes of all staff.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officer	s & Key Employees
Board Of Directors review and approve key employee salaries and	d approve the budget
for changes of all staff.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Upon request	

Schedule 0 (Form 990) 2009	<u></u>	Page 2
Name of the organization Christian Camps & Conferences, Inc.	Employer identification number 23-7305424	
Christian Camps & Conferences, Inc.	23 /303121	
		· <del></del> -
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	<b></b>	
		- <i></i>
		<b>.</b>
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		<b></b>

009 Sch	nedule A	A, Part IV	- Suppleme	ental Inform	nation	Page !
		Christian Ca	mps & Conferer	nces, Inc.		23-730542
Part III, Line 12 - Other In	ıcome					
Nature and Source		2009	2008	2007	2006	2005
Miscellaneous Insurance Claim Inco	ome otal <u>\$</u>	267. 13,178. 13,445. \$	2,905. 2,905.	7,274. 1,778. 9,052.	3,963. 6,654. 10,617.	3,387. 148,670. 152,057.
					•	

009	Schedule D, Part XIV - Supplem	ental Information	Page
	Christian Camps & Conferer	nces, Inc.	23-730542
Schedule D, Part Other Changes Ir	XI, Line 8 Net Assets Or Fund Balances		
Change in Defe	erred Compensation .	Total \$	-2,685. -2,685.
Schedule D, Part Other Revenue Ir	XII, Line 2d icluded In F/S But Not Included On Form 990		
Change in Defe	erred Compensation .	Total \$	-2,685. -2,685.

# Form **8868** (Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

► File a separate application for each return.

internal Revenue	Service	The a separate application for each			_	
<ul><li>If you are</li></ul>	filing for an Automatic 3-Month	Extension, complete only Part I and ched	k this box	-		► X
If you are	filing for an Additional (Not Au	tomatic) 3-Month Extension, complete onl	ly Part II (on p	page 2 of thi	s form).	
-		ady been granted an automatic 3-month ex		_	•	
	<del></del>	sion of Time. Only submit original				
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension	on – check th	nis box and o	complete Part I c	only -
All other corp		), partnerships, REMICS, and trusts must (	use Form 700	4 to request	an extension of	time to file
returns noted the additional Form 990-T	below (6 months for a corporat (not automatic) 3-month extens	electronically file Form 8868 if you want a 3 on required to file Form 990-T). However, sion or (2) you file Forms 990-BL, 6069, or ly completed and signed page 2 (Part II) o e-file for Charities & Nonprofits	you cannot fi 8870, group	le Form 8868 returns, or a	8 electronically if composite or co	f (1) you want
	Name of Exempt Organization				Employer identificat	ion number
Type or						
print	Christian Camps & Co	onferences, Inc.			23-7305424	Į.
File by the due date for	Number, street, and room or suite number					
filing your return See	34 Camp Brookwoods I	Road				
instructions	City, town or post office, state, and ZIP co	de For a foreign address, see instructions				
	Alton, NH 03809-9713					
Check type o	f return to be filed (file a separa	ate application for each return):				
X Form 990	)	Form 990-T (corporation)		Form 472	20	
Form 990	)-BL	Form 990-T (section 401(a) or 408(a) tr	rust)	Form 522	27	
Form 990	)-EZ	Form 990-T (trust other than above)	Ì	Form 606	59	
Form 990	)-PF	Form 1041-A		Form 887	70	
<ul> <li>If the org.</li> <li>If this is find the check this the exten</li> </ul>	or a Group Return, enter the org s box ► ☐ If it is for part of sion will cover.	FAX No Pe or place of business in the United States panization's four digit Group Exemption Nuthe group, check this box P and attacks.	imber (GEN) ch a list with	If the names a		
untıl _ The ext ► X	8/15, 20_10, to file ension is for the organization's calendar year 20_09 or	ths for a corporation required to file Form to the exempt organization return for the orgeturn for: , 20, and ending	•			
2 If this to	ax year is for less than 12 month	ns, check reason: Initial return	Final retur	n C	change in accour	iting period
	pplication is for Form 990-BL, 9 indable credits. See instructions	90-PF, 990-T, 4720, or 6069, enter the ten	tative tax, les	s any	3a\$	0.
<b>b</b> If this a made. I	pplication is for Form 990-PF or include any prior year overpaym	990-T, enter any refundable credits and e ent allowed as a credit	stimated tax	payments	3b\$	0.
deposit	e Due. Subtract line 3b from line with FTD coupon or, if required structions	3a Include your payment with this form, oby using EFTPS (Electronic Federal Tax I	or, if required Payment Sys	tem)	3c \$	0.
Caution. If yo payment inst		nic fund withdrawal with this Form 8868, se	ee Form 8453	I-EO and For	m 8879-EO for	
BAA For Pri	vacy Act and Paperwork Reduc	tion Act Notice, see instructions.			Form <b>886</b>	8 (Rev 4-2009)

SAA FOI FIIVACY ACT and Paperwork Reduction Act House, see instructions