

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



2009

OMB No 1545 1150

Department of the Treasury Internal Revenue Service

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 may use this form

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

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning					0000	P		
Access clarger   Acce	A			year, or tax year beginning	, 2009, and end			
None care   Section   Se	Ę	$\neg$	Diago	C				
Temporation   Section 591(c/3) organizations and 4947(e/1) nonexempt charitable trusts   Section 591(c/3) organizations and 4947(e/1) nonexempt charitable trusts   Section 591(c/3) organizations and 4947(e/1) nonexempt charitable trusts   Check   If the organization is not a scenario   Section 591(c/3) organizations and 4947(e/1) nonexempt charitable trusts   Check   If the organization is not a scenario   Section 591(c/3) organization is not a scenario   Section 591(c/3) organization is not a scenario   Section 591(c/3) supporting organization and its gross recepts are normally not more than \$25,000 A Form 990 EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return   Add lines \$5,000 A Form 990 EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return   Add lines \$5,000 A Form 990 EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return   Add lines \$5,000 A Form 990 EZ or Form 990 EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return   Add lines \$5,000 A Form 990 EZ or Form 990 EZ	ļ		ddress change use IRS					
Termination   Amended return   Amended	ĺ	=	print or	aka Italistotiii nsta				
Section Stills(A) organizations and 4947(AV) nonexempt charitable trusts must attack a completed Schedule A (Form 990 or 990-EZ).   G Accounting method   Cash     Accrual of the (speech)   Cash     Accrual of the (speech)   H Check   If the organizations is not required to attack a complete Schedule B (Form 990 or 990-EZ).   H Check   If the organization is not a required to attack schedule B (Form 990.   30-EZ, or 990-EZ or Form 990 return is not required, but if the organization and its gross receipts are normally not more than \$55,000 A Form 990-EZ or Form 990 return is not required, but if the organization and its gross receipts are normally not more than \$55,000 A Form 990-EZ or Form 990 return is not required, but if the organization and its gross receipts are normally not more than \$55,000 A Form 990-EZ or Form 990 return is not required, but if the organization and its gross receipts are normally not more than \$55,000 A Form 990-EZ or Form 990 return is not required, but if the organization and its gross receipts are normally not more than \$55,000 A Form 990-EZ or Form 990 return is not required, but if the organization and its gross receipts are normally not more than \$55,000 A Form 990-EZ or Form 990 return is not required. But if the organization is not required to attack schedule B (Form 990-EZ or Form 990	ŀ	=	الأغما			3	03 69	93-6122
Website:	ŀ	_	mended return Instruc-	Aurora, CO 80044-0283		F Gr	nun Ex	emption
Website:	ŀ	=	tions					<b>&gt;</b>
Website:	-		• Section 501(c)(3	3) organizations and 4947(aV1) nonexempt charit.	able trusts	G Accounting metho	d 🗌	Cash X Accrual
Website:			must atta	ach a completed Schedule À (Form 990 or 990-EZ	).	Other (specify) ►		
Jave-events taths (check only only   1   1   1   1   1   1   1   1   1				_	İ			
Second process of the contributions of the contributions of the contributions of Speak evenue including Speak ev	ı				<del></del>	required to attach	Sched	ule B (Form 990,
\$25,000 A Form 990 EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return  L. Add times \$b, 6b, and 7b, to lime 9 to determine gross receipts, if \$500,000 or more, file Form 990  Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)  1. Contributions, girts, grants, and similar amounts received  2. Program service revenue including government fees and contracts  3. Membership dues and assessments  4. Investment income  5. Gross amount from sale of assets other than inventory  5. Less cost or other basis and sales expenses  6. Special events and activities (complete applicable parts of Schedule 6). If any amount is from gaining, check here  7. Gross are of the complete applicable parts of Schedule 6). If any amount is from gaining, check here  8. One revenue (not including \$ of contributions received in contracts of the contributions received on line I).  9. Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10. Gross profit or (loss) from sales of inventory (Subtract line 7b from line 8a).  10. Grants and similar amounts paid (attach schedule)  11. Grants and similar amounts paid (attach schedule)  12. Salances, other compensation, and employee benefits  13. Professional fees and other payments to independent contract of the propers (describe* See Statement 1)  14. Total expenses. Add lines 10 through 16  15. Printing, publications, postage, and shipping  16. Other appears (describe* See Statement 1)  17. Total expenses. Add lines 10 through 16  18. Excess or (deficit) for the year (Subtract line 7)  19. Part II Balance Sheets. If Total assets on line 25. Column (B) are \$1,250,000 or more, file Form 990 instead of Form 990.EZ  22. Cash, savings, and investments  23. Total assets  24. Other assets of fund balances at end of year Combine lines 18 through 20  25. Total assets  26. Other assets (describe * See Statement 2)  27. Net assets or fund balances (line 27 of column (B) must agree with l	لے		ax-exempt status (check o	$\frac{\text{only one}}{\text{only one}} - \frac{ X }{ X } \frac{501(c)}{(3)} \left(\frac{3}{ X }\right) \blacktriangleleft \frac{(\text{insert no})}{(10)} = \frac{494}{(10)}$		<u> </u>	<u> </u>	
Add lines (\$b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990   ► \$ 469,092.	r		Check Lifthe org	ganization is not a section 509(a)(3) supporting org 7 or Form 990 return is not required, but if the organization	ganization <b>and</b> its g	ross receipts are nor a return, he sure to file	maily <b>r</b>	i <b>ot</b> more than plete return
Part   Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)   1	-		<u> </u>					
Part   Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the Instructions for Part I.)   1	L				Juu or more, lile Fo	nn 990	▶\$	469,092.
1   469,003.   2   2   7   7   7   3   7   3   3   3   3   3	П				or Fund Balanc	es (See the instru	iction	
2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) 6 Special events and activities (complete applicable parts of Schedule 6) If any amount is from gaming, check here a Gain or (loss) from sale of assets other than inventory (Subtract In 6b from In 5a) 6 Special events and activities (complete applicable parts of Schedule 6) If any amount is from gaming, check here a Gain or (loss) from sale of assets other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b) 7 a Gross revenue (describe - 8 Net income or (loss) from special events and activities (Subtract line 7b from line 6a) 7 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7 total revenue (describe - 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 8 Professional fees and other payments to independent contractors 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Coupancy, rent, utilities, and maintenance 15 Prinning, publications, postage, and shipping 16 Other expenses (describe - See Statement 1 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 92, 476. 20 Other changes in net assets or fund balances (attach explanation) 21 Net assets for fund balances and of year Combine lines 18 through 20 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (secri	<u></u>	Ť					1	469,003.
3   4   89.					5		2	
4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract in 6 form in 5a) Special events and activities (organized applicable parts of Schedule 6) If any amount is from gaming, check here a Gross revenue (not including \$ of contributions reported on line 1) b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (secrible * 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 10 Grants and similar amounts paid (attach schedule) 11 Emerits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional flees and other payments to independent contractors 14 Cocupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 December and other payments to independent contractors 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Aug 1 de 20, 20 Cupancy, rent, utilities, and maintenance 10 Grants and incomplants of the payments of the paym				3 3		i	3	
b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a)  5 c  6 a Gross revenue (not including \$ of contributions reported on line 1) b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)  7 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe ►  9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Total davepenses. Add lines 10 through 16  18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 21 Net assets or fund balances at end of year Combine lines 18 through 20  19 Net assets or fund balances at end of year Combine lines 18 through 20  10 Clarer changes and investments 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (Secsribe ► See Statement 2) 25 Total assets 26 Total liabilities (describe ► See Statement 2) 26 Other assets of fund balances (line 27 of column (B) must agree with line 21) 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Part II Balance Sheets. If Total assets on fund 20 of column (B) must agree with line 21) 29 Cash, savings, and investments 30 Cher assets (describe ► See Statement 2) 31 Cash, savings, and investments 32 Cash, savings, and investments 33 Cash assets or fund balances (line 27 of column (B) must agree with line 21) 31 Cash, savings, and investments 32 Cash, savings, and investments 33 Cash assets or fund balances (line 27 of column (B) must agree with line 2							4	89.
C Gam or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a)   S			5a Gross amount fr	om sale of assets other than inventory	5a			
6 Special events and activities (complete applicable parts of Schedule 6) If any amount is from gaming, check here a Gross revenue (not including \$ of contributions reported on line 1) b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe * See Statement 1			<b>b</b> Less cost or oth	ner basis and sales expenses	5 b		1	
b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)  7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe > 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 7, 492.  14 Occupancy, rent, utilities, and maintenance 15 Printling, publications, postage, and shipping 16 262,123. 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (attach explanation) 21 Net assets or fund balances at end of year Combine lines 18 through 20 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total assets 26 Total liabilities (describe > See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Part II Balance States See Statement 2 29 Lend and buildings 20 Lind and buildings 21 Lind and buildings 22 Total assets 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total assets 26 Total liabilities (describe > See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 29 Let assets or fund balances (line 27 of column (B) must agree with line 21) 29 Let a set of und balances (line 27 of column (B) must agree with line 21) 20 Line (A) Beginning of year (B) End of ye		Ŗ	c Gain or (loss) from s	sale of assets other than inventory (Subtract In 5b from In 5a)		_	5с	
b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)  7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe > 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 7, 492.  14 Occupancy, rent, utilities, and maintenance 15 Printling, publications, postage, and shipping 16 262,123. 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (attach explanation) 21 Net assets or fund balances at end of year Combine lines 18 through 20 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total assets 26 Total liabilities (describe > See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Part II Balance States See Statement 2 29 Lend and buildings 20 Lind and buildings 21 Lind and buildings 22 Total assets 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total assets 26 Total liabilities (describe > See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 29 Let assets or fund balances (line 27 of column (B) must agree with line 21) 29 Let a set of und balances (line 27 of column (B) must agree with line 21) 20 Line (A) Beginning of year (B) End of ye		2	6 Special events and a	ctivities (complete applicable parts of Schedule G) If any amou	nt is from <mark>gaming,</mark> chec	k here		
b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)  7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe > 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 7, 492.  14 Occupancy, rent, utilities, and maintenance 15 Printling, publications, postage, and shipping 16 262, 123. 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 Excess or (deficit) for the year (Subtract line 7b from line 27) 19 Net assets or fund balances at end of year Combine lines 18 through 20  Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  20 Cash, savings, and investments 21 Cash, savings, and investments 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe > See Statement 2 ) 25 Total assets 26 Total liabilities (describe > See Statement 3 ) 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 29 Net assets or fund balances (line 27 of column (B) must agree with line 21) 29 Q, 476, 27 174, 132.		Ň	a Gross revenue (	not including \$ of contributions of cont	itions			
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)  7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe * 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe * See Statement 1 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or (und balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances at end of year Combine lines 18 through 20 21 Cash, savings, and investments 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe * See Statement 2 25 Total assets 26 Total liabilities (describe * See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Total assets or fund balances (line 27 of column (B) must agree with line 21) 29 Quantifications, paying and investments 20 Cash, savings, and investments 21 Cash, savings, and investments 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe * See Statement 2 25 Total assets 26 Total liabilities (describe * See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Total assets or fund balances (line 27 of column (B) must agree with line 21) 29 Quantification (line 27 of column (B) must agree with line 21) 29 Quantification (line 27 of column (B) must agree with line 21) 20 Quantification (line 27 of column (B) must agree with line 21) 20 Quantifi		Ĕ	reported on line	1)	6a			
Ta Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe ► 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe ► See Statement 1 17 Total expenses. Add lines 10 through 16  18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 Net assets or fund balances at end of year Combine lines 18 through 20  19 Net assets or fund balances at end of year Combine lines 18 through 20  10 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  (See the instructions for Part II) (A) Beginning of year (A) Beginning of year (B) End of year (A) Beginning of year (B) End of year (B) End of year 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe ► See Statement 2 25 Total assets  10 See Statement 3 10 See Statement 3 11 See Statement 3 11 See Statement 3 11 See Statement 3 11 See Statement 3 12 See Statement 3 12 See Statement 3 12 See Statement 3 12 See Statement 3 11 See Statement 3 12 See Statement 3 12 See Statement 3 12 See Statement 3 12 See Statement 3 13 Total expenses (describe ► See Statement 3 10 See Statement 3 11 See Statement 3 11 See Statement 3 11 See Statement 3 12 See Statement 3 12 See Statement 3 13 See Statement 3 15 See Statement 3 16 Statement 3 17 See Statement 3 17 See Statement 3 18 See Statement 3 19 See Statement 3 10 See Statement 3 10 See Statement 3 10 See Statement 3 11 See St			<b>b</b> Less direct expe	enses other than fundraising expenses	6 b			
b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe > 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe > See Statement 1 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (attach explanation) 21 Net assets or fund balances at end of year Combine lines 18 through 20 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total assets 26 Total liabilities (describe > See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 Total liabilities (describe > See Statement 3 29 Statement 3 20 Other changes in net assets or fund balances (line 27 of column (B) must agree with line 21) 29 Statement 3 20 Other assets (describe > See Statement 3 20 Other assets (describe > See Statement 3 21 Net assets or fund balances (line 27 of column (B) must agree with line 21) 21 Net assets or fund balances (line 27 of column (B) must agree with line 21) 22 Other assets or fund balances (line 27 of column (B) must agree with line 21) 23 Other assets or fund balances (line 27 of column (B) must agree with line 21) 24 Other assets or fund balances (line 27 of column (B) must agree with line 21) 25 Other assets or fund balances (line 27 of column (B) must agree with line 21)			c Net income or (loss)	from special events and activities (Subtract line 6b from line 6	a) , ,		6 c	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe > 9 Total revenue (describe > 10 Total revenue (describe > 10 Total revenue (describe > 11 Total revenue (revenue		- 1	7a Gross sales of in	nventory, less returns and allowances.				
8 0 ther revenue (describe > 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		1	-		L			
9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8  10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe > See Statement 1 17 Total expenses, Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (attach explanation) 21 Net assets or fund balances at end of year Combine lines 18 through 20 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total liabilities (describe > See Statement 3 26 Other changes in Patalassets 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 28 See Statement 3 29 Land and buildings 20 Land and buildings 21 Cash, savings, and investments 22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe > See Statement 2 25 Total liabilities (describe > See Statement 3 26 Total liabilities (describe > See Statement 3 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 29 Quarter (B) 469, 092. 40 Cash, savings, and investments 40 A Beginning of year 41 Cash (B) End of year 42 Cash, savings, and investments 42 Cash, savings, and investments 43 Land and buildings 44 Cash (B) End of year 45 Land and buildings 46 Cash, savings, and investments 47 Land and buildings 48 Cash (B) End of year 49 Cash (B) End of year 40 Cash (B) End of year 41 Land (B) End of year 42 Cash (B) End of year 43 Cash (B) End of year 44 Cash (B) End of year 45 Land (B) End of year 46 Cash (B) End of year 47 Land (B) End			<b>c</b> Gross profit or (	loss) from sales of inventory (Subtract line 7b from			7c	
10   Grants and similar amounts paid (attach schedule)   11   Benefits paid to or for members   12   Salaries, other compensation, and employee benefits   13   Professional fees and other payments to independent contractors   OGDEN.UT   14   12   116,846.   13   7,492.   14   Occupancy, rent, utilities, and maintenance   15   Printing, publications, postage, and shipping   15   975.   16   262,123.   17   Total expenses (describe   See Statement 1   )   16   262,123.   17   Total expenses. Add lines 10 through 16   17   17   18   17   18   18   18   1656.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   81,656.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   20   21   174,132.   20   21   174,132.   21   22   24   24   24   25   24   25   24   25   25					RECEIVE	D)		
10	_		9 Total revenue A	Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8			9	469,092.
Salaries, other compensation, and employee benefits   12   116,846.   13   7,492.   14   Occupancy, rent, utilities, and maintenance   15   Printing, publications, postage, and shipping   15   975.   16   0ther expenses (describe * See Statement 1   17   17   18   17   18   18   18				lar amounts paid (attach schedule)			10	
12 Salaries, other compensation, and employee benefits   13 Professional fees and other payments to independent contractors   13   7,492.   14   15   975.   15   975.   15   975.   16   0ther expenses (describe > See Statement 1   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   81,656.   18   Excess or (individual balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   20   19   92,476.   20   Other changes in net assets or fund balances (attach explanation)   21   Net assets or fund balances at end of year Combine lines 18 through 20   21   174,132.   22   Cash, savings, and investments   100,883.   22   178,423.   23   24   Other assets (describe > See Statement 2   2,991.   24   2,448.   248.   25   Total assets   103,874.   25   180,871.   25   Total liabilities (describe > See Statement 3   11,398.   26   6,739.   27   Net assets or fund balances (line 27 of column (B) must agree with line 21)   92,476.   27   174,132.   27   174,132.   27   174,132.   28   27   Net assets or fund balances (line 27 of column (B) must agree with line 21)   92,476.   27   174,132.   27   174,132.   28   27   174,132.   28   27   27   27   27   27   27   27		F	11 Benefits paid to	or for members	AUG 1 6 20	10 10		
16   Other expenses (describe   See   Statement   1   1   262,123.   1   1   387,436.   1   1   1   387,436.   1   1   387,436.   1   1   387,436.   1   1   387,436.   1		ž		compensation, and employee benefits	,,	<u> </u>		
16   Other expenses (describe   See   Statement   1   1   262,123.   1   1   387,436.   1   1   1   387,436.   1   1   387,436.   1   1   387,436.   1   1   387,436.   1		Ē		· -	OCDEN	IT -		7,492.
16   Other expenses (describe   See   Statement   1   1   262,123.   1   1   387,436.   1   1   1   387,436.   1   1   387,436.   1   1   387,436.   1   1   387,436.   1		Š			OGDEN,			
17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   81,656.     18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   81,656.     19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   20     20   Other changes in net assets or fund balances (attach explanation)   20     21   174,132.     22   Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)   (A) Beginning of year   (B) End of year     22   Cash, savings, and investments   100,883.   22   178,423.     23   Land and buildings   23     24   Other assets (describe   See Statement 2   )   2,991.   24   2,448.     25   Total assets   103,874.   25   180,871.     26   Total liabilities (describe   See Statement 3   )   11,398.   26   6,739.     27   Net assets or fund balances (line 27 of column (B) must agree with line 21)   92,476.   27   174,132.								
18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   81,656.	Ų,	ا ي				)		
18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   81,656.	20	}						
figure reported on prior year's return)  Other changes in net assets or fund balances (attach explanation)  Net assets or fund balances at end of year Combine lines 18 through 20  Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  (See the instructions for Part II)  (A) Beginning of year (B) End of year  Cash, savings, and investments  100,883. 22 178,423.  Land and buildings  24 Other assets (describe > See Statement 2 ) 2,991. 24 2,448.  Total assets  Total liabilities (describe > See Statement 3 ) 11,398. 26 6,739.  Net assets or fund balances (line 27 of column (B) must agree with line 21) 92,476. 27 174,132.		- 1	•				18	81,656.
Other changes in net assets or fund balances (attach explanation)  20    Net assets or fund balances at end of year Combine lines 18 through 20   Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ    (See the instructions for Part II)   (A) Beginning of year   (B) End of year		, ŝ	19 Net assets or ful	nd balances at beginning of year (from line 27, co	ılumn (A)) (must aç	gree with end-of-year	10	02 176
Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)	اً ۵	E E	•	• •				92,470.
Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)	H		-					174 122
(See the instructions for Part II )  22 Cash, savings, and investments  23 Land and buildings  24 Other assets (describe ► See Statement 2 )  25 Total assets  26 Total liabilities (describe ► See Statement 3 )  27 Net assets or fund balances (line 27 of column (B) must agree with line 21)  (A) Beginning of year   (B) End of year    100,883.   22   178,423.    23    24 Other assets (describe ► See Statement 2 )  25 Total assets  103,874.   25   180,871.    11,398.   26   6,739.    27 Net assets or fund balances (line 27 of column (B) must agree with line 21)   92,476.   27   174,132.	_					(1- 5 000		
25 Total assets       103,874.   25   180,871.         26 Total liabilities (describe ► See Statement 3 )       11,398.   26   6,739.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       92,476.   27   174,132.		Par	TII   Balance S		1,250,000 <u>or mor</u>			
25 Total assets       103,874.   25   180,871.         26 Total liabilities (describe ► See Statement 3 )       11,398.   26   6,739.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       92,476.   27   174,132.	2	22	Coch coungs and	•	}			
25 Total assets       103,874.   25   180,871.         26 Total liabilities (describe ► See Statement 3 )       11,398.   26   6,739.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       92,476.   27   174,132.	1			HIVESUNEINS	ł	100,003		110, 123.
25 Total assets       103,874.   25   180,871.         26 Total liabilities (describe ► See Statement 3 )       11,398.   26   6,739.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       92,476.   27   174,132.	Ü			the ► See Statement 2	ŀ	2 991		2.448
26 Total liabilities (describe ► See Statement 3 )       11,398. 26 6,739.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       92,476. 27 174,132.	Ō		·	)	ł			
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 92,476. 27 174,132.				cribe > See Statement 3	ł			
					ine 21)			
	-					5-7-70	13.1	Form <b>990-EZ</b> (2009)

FOITH	990-EZ (2009) <u>Kallipuchea Tot C</u>					2004 Page 2
<b>Part</b>	III Statement of Program Se	rvice Accomplishments	(See the instruction	ons )		Expenses
Descr descri	the organization's primary exempt purpose? Se tibe what was achieved in carrying out the bethe services provided, the number of am title	e Statement 4 ne organization's exempt purp f persons benefited, or other i	poses In a clear and correlevant information for	oncise manner, each	(Reg 501 ( orga 4947 for o	uired for section c)(3) and (4) nizations and section (a)(1) trusts, optional thers)
-	See Statement 5 (Grants \$ ) If the	ans amount includes foreign gr	ants check here		28 a	296,374.
29						330,0.11
30		nis amount includes foreign gr			29 a	
31	Other program services (attach schedul	•		<u> </u>	30 a	
		nis amount includes foreign gr	rants, check here		31 a	206 274
	Total program service expenses (add l				32	296,374.
Part	IV List of Officers, Directors	<u> </u>				
	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit plai deferred compensa	ns and	
601	an Lee 7 S Ukraine St ora, CO 80015	President & CEO 0	56,391.		0.	1,844.
277	x Clark 9 E 15th St #308 per, WY 82609	Treasurer 0	0.		0.	0.
231 Suwa	colm Cash 5 Shore View way anee, GA 30024	Chairman 0	29,250.		0.	0.
177: Cas	an Kalsbeek 13 Chateau Ct tro Valley, CA 94552	Executive Direc 0	0.		0.	0.
839 Daw:	th_Burlingame Nightfire_Drsonville, GA 30534	Director 0			0.	0.
719	dy Decker O Hwy 73 rgreen, GA 80439	Director 0	0.		0.	0.
5768 Mur:	Warren 8 Shawow Oakls Dr rayville, GA 30564	Director 0	3,000.		0.	0.
379 Den	ert Little 6 S Jersey St ver, CO 80237	Director 0	0.		0.	0.
123	k Sheehan 1 E Michener Way hland Ranch, CO 80126	Director 0	0.		0.	0.
231 Nap	n DeAngelis 6 Harrier Run les, FL 34105	Director 0	0.		0.	0.
613	l Bennett Jr 1 Pine Hollow Dr ker, CO 80134	Director 0	0.		0.	0.

Par	t V Other Information (Note the statement requirements in the instrs for Part V.) See Sta	teme	nt	6
	_		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 <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			I
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35 a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
	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		<u>X</u> _
	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.	276		Х
	Did the organization file Form 1120-POL for this year?	37 b		
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a	<u> </u>	X
t	off 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
	Section 501(c)(7) organizations Enter			İ
	Initiation fees and capital contributions included on line 9  Gross receipts, included on line 9, for public use of club facilities  39a N/A N/A			
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			İ
	section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.			
ı	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 '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   0.			
e	e 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		Х
41	List the states with which a copy of this return is filed ► CO			
<b>42</b> a	The organization's books are in care of Shelba Hammond Telephone no 303 69  Located at 11373 E Alameda Ave Aurora CO ZIP + 4 80012-			
ŀ	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	[	Yes	No
•	financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country  Cambodia	42b	Х	
c	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts:  At any time during the calendar year, did the organization maintain an office outside of the U S?  If 'Yes,' enter the name of the foreign country	42 c	X_	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		► []	N/A N/A
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead	_	Yes	No
	of Form 990-EZ	44		X
	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	TEEA0812L 01/30/10 For	n 990	-EZ (	2009)

Form '990-EZ (2009) Kampuchea for Christ, USA 84-1352664 Page 4 Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section Part VI 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51. 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 Yes No 46 46 Х Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 47 X 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 48 Х 49 a 49 a Did the organization make any transfers to an exempt non-charitable related organization? 49 b b If 'Yes,' was the related organization a section 527 organization? Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None' (e) Expense (b) Title and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (c) Compensation account and other allowances (a) Name and address of each employee paid more than \$100,000 None f Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation None d Total number of other independent contractors each receiving over \$100,000 Under penalties of perjury | declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signa Date Here

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

**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.

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

**Open to Public** Inspection

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

Kampuchea for Christ, USA

Employer identification number

84-1352664 aka Transform Asia Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Functionally integrated |Type I Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, f check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii)

(i) Name of Supported Organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	on lines 1-9 organization in col the organization IRC section (i) listed in your col (i) of		(described on lines 1-9 above or IRC section (i) listed in your (see instructions))   organization in col (i) of (i) organization in col (i) of (i) organization in col (i) of (i) organization in col (i) of (ii) organization in col (ii) of (iii) organization in col (iii) organiz				ion in col zed in the	(vii) Amount of Suppor
			Yes	No	Yes	No	Yes	No		
	<del>.</del> .		<u> </u>							
							,	i 1		
						<del> </del>	<b></b>			
							}			

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

	(Complete only if you checke	_						<del></del>
	tion A. Public Support	-		T	Γ			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total
_	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	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support	T	7			<del>_</del>		
	ndar year (or fiscal year nning ın) ►	(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	<b>Total support</b> . Add lines 7 through 10							
12	Gross receipts from related activ	vities, etc. (see in	structions)			L	12	
	First five years. If the Form 990 organization, check this box and	I stop here		ond, third, fourth,	or fifth tax year a	is a section 50	01(c)(3	3) ▶ □
	tion C. Computation of Pu			11 1 (0			1.0	
	Public support percentage for 20 Public support percentage from			ine 11, column (f)		E	14 15	<u>%</u> %
16	a 33-1/3 support test – 2009. If the and stop here. The organization	e organization did qualifies as a pu	d not check the biblicly supported (	ox on line 13, an organization.	d the line 14 is 33	3-1/3 % or mo	re, ch	eck this box ► □
ı	<b>b 33-1/3 support test</b> – <b>2008.</b> If th and <b>stop here</b> . The organization	e organization did	d not check a box	on line 13, or 16	ia, and line 15 is 3	33-1/3% or mo	ore, ch	neck this box
17	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-	and-circumstance	es' test, check this	s box and <b>stop he</b>	re. Explain in	Part I	V how
	b 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- id-circumstances'	and-circumstance test The organ	es' test, check this sization qualifies a	s box and <b>stop he</b> as a publicly supp	e <b>re.</b> Explain in orted organiza	Part I	V how the   □
18	Private foundation. If the organ	ization did not ch	eck a box on line	, 13, 16a, 16b, 17				
RAA	\				So	cnedule <b>A</b> (Fo	rm 99	0 or 990-EZ) 2009

# Schedule A (Form 990 or 990-EZ) 2009 Kampuchea for Christ, USA Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chec	ked the box on lir	ne 9 of Part I)				
Sec	tion A. Public Support				<u> </u>		
	idar 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 ')	646,190.	532,080.	465,424.	472,356.	469,003.	2,585,053.
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
	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.
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1.	646,190.	532,080.	465,424.	472,356.	469,003.	2,585,053.
	2, 3 received from disqualified persons Amounts included on lines 2	0.	0.	0.	15,295.	10,306.	25,601.
•	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.	15,295.	10,306.	25,601.
	Public support (Subtract line	- 0.		<u>.</u>	13,233.	10,300.	23,001.
0	7c from line 6)	-					2,559,452.
Sec	tion B. Total Support	I			1		
		(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
Cale	ndar year (or fiscal yr beginning in)	(a) 2005 646, 190	<b>(b)</b> 2006 532, 080.	(c) 2007 465, 424.	(d) 2008 472, 356.	(e) 2009 469, 003.	(f) Total 2,585,053.
Cale 9		(a) 2005 646, 190.	<b>(b)</b> 2006 532,080.	(c) 2007 465, 424.	(d) 2008 472, 356.	(e) 2009 469,003.	2,585,053.
Cale 9 10 a	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	646,190.	532,080.	465,424.	472,356.	469,003.	2,585,053. 0.
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						2,585,053.
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.	646,190.	532,080.	465,424.	472,356.	469,003.	2,585,053. 0.
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	646,190.	532,080.	465,424.	472,356.	469,003.	2,585,053. 0. 0. 0.
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.	0.	0.	0.	0.	2,585,053. 0. 0. 0. 0. 2,585,053.
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	0.  s for the organizatop here	0.	0.	0.	0.	2,585,053. 0. 0. 0. 0. 2,585,053.
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 ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	0. s for the organization here	0.	0. d, third, fourth,	0.	0. 0.	2,585,053. 0. 0. 0. 0. 2,585,053. (3) ▶ □
Cale 9 10 a 11 12 13 14 Sec 15	Amounts from line 6.  Amounts from line 6.  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add ins 9, 10c, 11, and 12).  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul.	0.  Is for the organization here  blic Support P  109 (line 8, column	0.  o.  etion's first, secondercentage  of divided by line	0. d, third, fourth,	0.	0.	2,585,053. 0. 0. 0. 0. 2,585,053.
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 Pull Public support percentage from 20.	o.  Is for the organization here  blic Support P 109 (line 8, column 2008 Schedule A,	0.  otion's first, secondercentage  otion's divided by line Part III, line 15	0. d, third, fourth,	0.	0.	2,585,053. 0. 0. 0. 0. 2,585,053. (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 Pul Public support percentage from 20 Public support percentage from 21  tion D. Computation of Inv	o.  is for the organizatop here  blic Support P 109 (line 8, columnator) 2008 Schedule A, estment Incon	o.  o.  o.  o.  etion's first, second ercentage o (f) divided by line Part III, line 15 ne Percentage	465, 424.  0.  third, fourth,	0.	0.	2,585,053. 0. 0. 0. 0. 2,585,053. (3) ► □
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 Public support percentage from 2 tion D. Computation of Investment income percentage from 2 tion D. Computation of	o.  o.  o.  o.  o.  o.  o.  o.  o.  o.	o.  0.  otion's first, second ercentage of (f) divided by line Part III, line 15 one Percentage column (f) divided	0. d, third, fourth, e 13, column (f)	0.	0. 0. 15 16	2,585,053.  0.  0.  0.  2,585,053.  (3)  99.0%  0.0%
Cale 9 10 a 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 ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from thouse the support percentage from 133-1/3 support tests - 2009. If the 6 in 33-1/3 support tests - 2009.	o.  o.  ostop here  blic Support P  og (line 8, column 2008 Schedule A, estment Incon or 2009 (line 10c, rom 2008 Schedul	o.  0.  otion's first, second ercentage of (f) divided by line Part III, line 15 ne Percentage column (f) divided le A, Part III, line check the box on line	0.  d, third, fourth,  e 13, column (f))  by line 13, column  re 14, and line 15	or fifth tax year as	469,003.  0.  15  16  17  18 %, and line 17 is no	2,585,053.  0.  0.  0.  2,585,053.  (3)  ▶ □  99.0%  0.0%
Cale 9 10 a 11 12 13 14 Sec 17 18 19 a	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from attion D. Computation of Investment income percentage from 133-1/3 support tests – 2009. If the comore than 33-1/3%, check this box	o.  o.  o.  o.  o.  o.  o.  o.  o.  o.	o.  0.  otion's first, second ercentage  of (f) divided by line Part III, line 15  ne Percentage column (f) divided by A, Part III, line check the box on line The organization	d, third, fourth,  1 by line 13, column  17  1 to 14, and line 15 qualifies as a pi	or fifth tax year as timn (f)).	469,003.  0.  15  16  17  18 %, and line 17 is no organization	2,585,053.  0.  0.  0.  2,585,053.  (3)  99.0%  0.0%  0.0%  0.0%
Cale 9 10 a 11 12 13 14 Sec 17 18 19 a 1	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from thouse the support percentage from 133-1/3 support tests - 2009. If the 6 in 33-1/3 support tests - 2009.	o.  Is for the organization did not one organization did not one organization did not other organization did nother organization	o.  0.  0.  otion's first, second ercentage  of (f) divided by line Part III, line 15  ne Percentage column (f) divided by line expansion of the organization of the o	d, third, fourth,  1 by line 13, column  17  18 14, and line 15  19 qualifies as a proportion on line 14 or 19  2 action qualifies as	or fifth tax year as time (f)).  Is more than 33-1/3 ablicly supported (a., and line 16 is reas a publicly supp	469,003.  0.  15  16  17  18 %, and line 17 is no organization nore than 33-1/3% orted organization	2,585,053.  0.  0.  0.  2,585,053.  (3)  99.0%  0.0%  0.0%  0.0%  XX 6, and line 18

Schedule A	(Form	990 or 9	990-EZ)	2009	Kan	npuci	iea .	IOL	Unr	<u>ist,</u>	USA	<u> </u>				84-13	3200	04		'age 4
Part IV	∫ <b>Supp</b> Part I	<b>lemen</b> I, line	<b>tal Inf</b> 17a o	<b>orma</b> r 17b;	tion. ( ; and	Comp Part	olete III, Iir	this ne 12	part 2. Pr	to pro ovide	ovide any	the e other	xplan addıtı	ations ional i	requ nform	ired b ation.	y Par See	t II, Iir Instru	ne 10; ictions	•
			·	·							-	<del></del>								
			- <b>-</b>		- <b></b>															
<del>_</del>															<b>-</b>		<del>-</del>			
																		<b>-</b>		
												<del>-</del>	- <b></b>							. <b>_</b>
			<b></b>									. <b></b>			<del>-</del>	- <b>-</b> -				
			<del>.</del>																	
																. – – –				
								<b>-</b>												
					- <b></b>			<b></b>					<del>-</del>	- <b></b> -						<del>-</del>
					<del>-</del>			. <b></b> .						<b>_</b> -		. – – –				
								. <b>_</b>								. – – –				
								. <b>_</b>							- <b></b> -					
					<del>-</del>											. – – –				
													<b>-</b>			<del>-</del>				
											·									
										. <b>-</b>										
								. <u> </u>		· <b></b> -										- <del></del> -
	<b>-</b>		<b></b>		- <b></b>				<b>-</b>					<b>_</b>		<b>-</b>	_ <b>_</b>	_ <b>_</b>		

2009	Federal Statements Kampuchea for Christ, USA aka Transform Asia		Page 1
Statement 1 Form 990-EZ, Part I, Line 16 Other Expenses  Bank and credit card fees Depreciation Direct program costs Information Technology Office Expenses Telephone Travel		\$ Total <u>\$</u>	2,019. 543. 201,735. 8,413. 5,494. 2,658. 41,261. 262,123.
Statement 2 Form 990-EZ, Part II, Line 24 Other Assets			
Machinery and Equipment		Beginning	Ending 2,448. 2,448.
Statement 3 Form 990-EZ, Part II, Line 26 Total Liabilities			

## Statement 4 Form 990-EZ, Part III Organization's Primary Exempt Purpose

Accounts Payable and Accrued Expenses

Kampuchea For Christ, U.S.A. (the "Organization") is a Colorado not-for-profit missionary organization that was incorporated June 18, 1996. The Organization is located in the city of Aurora.

11,398. \$ 11,398. \$

Total \$

6,739.

The purposes of the Organization include: to unite in fellowship with other Christians in the proclamation of Jesus Christ as Lord and Savior; to act as a Christian evangelistic organization for the purpose of spreading the Gospel of Jesus Christ; to act as a Christian organization for the purpose of counseling individuals and families to live within the Gospel of Jesus Christ; to teach and train individuals to counsel others in the same manner, including a seminary; to encourage family growth in the Christian lifestyle; to support and assist Christian missionaries; to establish a Christian school to provide children with a quality Christ-centered education; to conduct regular Christian worship services and related activities to promote the Gospel of Jesus Christ; to use oral, electric, written and other media and other public forums to promote ideals and purposes of the Organization; and to raise funds and to make distributions to organizations which qualify as exempt organizations under Section 501(c)(3) of the U.S. Internal Revenue Code.

The primary recipient of distributions is Kampuchea For Christ International (a sister organization) which works in Cambodia with the mission to win and reach alt of Cambodia for Christ, and from these fruits, to send laborers to reach the

2009

### **Federal Statements**

Kampuchea for Christ, USA aka Transform Asia

Page 2

84-1352664

Statement 4 (continued)
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

Khmer-speaking peoples surrounding Cambodia (i.e. Vietnam and Thailand). Support for the Organization's ministry comes primarily from donor contributions.

Statement 5 Form 990-EZ, Part III, Line 28 Statement of Program Service Accomplishments

The primary recipient of distributions is Kampuchea For Christ International (a sister organization) which works in Cambodia with the mission to win and reach all of Cambodia for Christ, and from these fruits, to send laborers to reach the Khmer-speaking peoples surrounding Cambodia (i.e. Vietnam and Thailand).

### Statement 6 Form 990-EZ, Part V Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

No

No