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Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

A For the 2013 calendar year, or tax year beginning and ending

B Check if applicable.

 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization

KAKO RETREAT CENTER

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

P.O. BOX 29

D Employer identification number

94-3082094

City or town, state or province, country, and ZIP or foreign postal code
RUSSIAN MISSION, AK 99657

E Telephone number

907-584-5200

G Gross receipts \$ 317,208.

H(a) Is this a group return for subordinates? Yes NoH(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ►

I Tax-exempt status: 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527J Website: ► WWW.KAKORETREATCENTER.ORGK Form of organization: Corporation Trust Association Other ►

L Year of formation: 1993 M State of legal domicile: AK

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: RELIGIOUS RETREAT CENTER
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 8
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 7
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 3
	6 Total number of volunteers (estimate if necessary) 6 0
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
Revenue	b Net unrelated business taxable income from Form 990-T, line 34 7b 0.
	8 Contributions and grants (Part VIII, line 1h) 273,608. 298,750.
	9 Program service revenue (Part VIII, line 2g) 16,362. 15,673.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,460. 1,653.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 291,430. 316,076.
	Prior Year Current Year
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0.
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 42,255. 39,918.
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25) ► 0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 216,520. 252,083.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 258,775. 292,001.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12 32,655. 24,075.
	Beginning of Current Year End of Year
	20 Total assets (Part X, line 16) 726,344. 763,172.
	21 Total liabilities (Part X, line 26) 29,048. 41,801.
	22 Net assets or fund balances. Subtract line 21 from line 20 697,296. 721,371.
	RECEIVED NOV 20 2014

Part II Signature Block

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

Sign Here	► <i>Vera Penz, Treasurer</i>	Date <i>November 14, 2014</i>			
	Signature of officer				
	► VERA PENZ, TREASURER				
	Type or print name and title				
Paid Preparer	Print/Type preparer's name CINDY L. HULQUIST, CPA	Preparer's signature <i>Cindy L. Hulquist, CPA</i>	Date <i>11/13/14</i>	Check if self-employed <input type="checkbox"/>	PTIN <i>P00166182</i>
Use Only	Firm's name ► THOMAS, HEAD & GREISER, PC		Firm's EIN ► <i>92-0043874</i>		
	Firm's address ► 1400 WEST BENSON BLD., 400 ANCHORAGE, AK 99503-3683				Phone no. <i>(907) 272-1571</i>

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

G 17 4

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission:**RELIGIOUS RETREAT CENTER**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 No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ 286,411. including grants of \$ _____) (Revenue \$ 15,673.)**THE RETREAT CENTER PROVIDES SEMINARS TO INDIVIDUALS, COUPLES, FAMILIES AND GROUPS ON SITE AND OVERNIGHT.**

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► 286,411.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3 X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5 X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7 X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. <ul style="list-style-type: none"> a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> b 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? <i>If "Yes," complete Schedule D, Part VII</i> c 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? <i>If "Yes," complete Schedule D, Part VIII</i> d 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? <i>If "Yes," complete Schedule D, Part IX</i> e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> 	11a X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <ul style="list-style-type: none"> b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12a X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13 X	
14a	Did the organization maintain an office, employees, or agents outside of the United States? <ul style="list-style-type: none"> b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> 	14a X	
14b	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	15 X	
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? <i>If "Yes," complete Schedule G, Part I</i>	16 X	
17	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	17 X	
18	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	18 X	
19	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> <ul style="list-style-type: none"> b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 	19 X	
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a X	
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b X	

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22	Did the organization report more than \$5,000 of grants or 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	X
23	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 Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a	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 any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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	X
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 I	25b	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	34	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	35a	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
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	2a	3
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	
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)?	4a	X
b If "Yes," enter the name of the foreign country: ► See instructions for 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 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
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 as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).	7a	X
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?		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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.	9a	
a Did the organization make any taxable distributions under section 4966?		
b Did the organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:	9b	
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:	11a	
a Gross income from 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.)	11b	
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	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	
a Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O</i>		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c Enter the amount of reserves on hand	13b	
14a Did the organization receive any payments for indoor tanning services during the tax year?	13c	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	X
	14b	

Part VI 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.
Check if Schedule O contains a response or note to any line in this Part VI **Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	8	
1b		7	
2	Enter the number of voting members included in line 1a, above, who are independent	2	X
3	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?	3	X
4	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?	4	X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5	X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	X
7a	Did the organization have members or stockholders?	7a	X
7b	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7b	X
8a	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	8a	X
8b	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	8b	X
a	The governing body?		
b	Each committee with authority to act on behalf of the governing body?		
9	Is there any officer, director, 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	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	13	X
13	Did the organization have a written whistleblower policy?	14	X
14	Did the organization have a written document retention and destruction policy?	15a	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15b	X
a	The organization's CEO, Executive Director, or top management official		
b	Other officers or key employees of the organization		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► AK
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► VERA PENZ - 907-584-5200
	P.O. BOX 29, RUSSIAN MISSION, AK 99657

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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, if any. See instructions for definition of "key employee."
- 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) (B) (C) (D) (E)

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Sub-total

24,899.	0.	0.
---------	----	----

c Total from continuation sheets to Part VII, Section A

0. 0. 0.

d Total (add lines 1b and 1c)

24,899. 0. 0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

0

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.

4		x
---	--	---

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.

5 X

Section B- Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

the organization. Report compensation for the calendar year ending with or within the organization's tax year.			
(A) Name and business address	(B) NONE	(C) Description of services	(D) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Grants and Other Similar Amounts	1 a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	298,750.		
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f		298,750.		
Program Service Revenue	2 a CAMP REGISTRATIONS	Business Code 721000	15,673.	15,673.	
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		15,673.		
	3 Investment income (including dividends, interest, and other similar amounts)				
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6 a Gross rents	(i) Real	(ii) Personal			
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)					
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less: direct expenses	b				
c Net income or (loss) from fundraising events					
9 a Gross income from gaming activities. See Part IV, line 19	a				
b Less: direct expenses	b				
c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a 2,785.				
b Less: cost of goods sold	b 1,132.				
c Net income or (loss) from sales of inventory		1,653.			
Miscellaneous Revenue	Business Code				
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		316,076.	15,673.	0.	1,653.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX X

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	24,899.	24,899.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	13,952.	13,952.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	1,067.	1,067.		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	3,340.		3,340.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	2,350.	2,350.		
17 Travel	15,675.	15,675.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	982.	982.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,945.	10,945.		
23 Insurance	9,461.	9,461.		
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FUEL EXPENSES	110,794.	110,794.		
b GROCERIES	25,088.	25,088.		
c REPAIRS AND MAINTENANCE	22,723.	22,723.		
d AIRPLANE EXPENSES	15,673.	15,673.		
e All other expenses SEE SCH O	35,052.	32,802.	2,250.	
25 Total functional expenses. Add lines 1 through 24e	292,001.	286,411.	5,590.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ► if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year	(B) End of year
Assets	1 Cash - non-interest-bearing	12,903.	1 40,063.
	2 Savings and temporary cash investments		2
	3 Pledges and grants receivable, net		3
	4 Accounts receivable, net		4
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6
	7 Notes and loans receivable, net		7
	8 Inventories for sale or use		8
	9 Prepaid expenses and deferred charges		9
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 751,070.	
	b Less accumulated depreciation	10b 27,961.	10c 723,109.
	11 Investments - publicly traded securities		11
	12 Investments - other securities. See Part IV, line 11		12
	13 Investments - program-related. See Part IV, line 11		13
	14 Intangible assets		14
	15 Other assets. See Part IV, line 11		15
	16 Total assets. Add lines 1 through 15 (must equal line 34)	726,344.	16 763,172.
Liabilities	17 Accounts payable and accrued expenses		17
	18 Grants payable		18
	19 Deferred revenue		19
	20 Tax-exempt bond liabilities		20
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	22 21,800.	22 17,800.
	23 Secured mortgages and notes payable to unrelated third parties	23 7,248.	24,001.
	24 Unsecured notes and loans payable to unrelated third parties		24
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25
	26 Total liabilities. Add lines 17 through 25	26 29,048.	41,801.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	27 697,296.	721,371.
	28 Temporarily restricted net assets		28
	29 Permanently restricted net assets		29
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds		30
	31 Paid-in or capital surplus, or land, building, or equipment fund		31
	32 Retained earnings, endowment, accumulated income, or other funds		32
	33 Total net assets or fund balances	33 697,296.	721,371.
	34 Total liabilities and net assets/fund balances	34 726,344.	763,172.

Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12)	1	316,076.
2 Total expenses (must equal Part IX, column (A), line 25)	2	292,001.
3 Revenue less expenses. Subtract line 2 from line 1	3	24,075.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	697,296.
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	721,371.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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?	2a	X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2b Were the organization's financial statements audited by an independent accountant?	2b	X
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

KAKO RETREAT CENTER

Employer identification number

94-3082094

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.)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
 3 A hospital or a 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 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
 7 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 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (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?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?	(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?	(vii) Amount of monetary support
				Yes	No		
Total							

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

Schedule A (Form 990 or 990-EZ) 2013

332021
09-25-13

14031113 759209 69204

2013.04030 KAKO RETREAT CENTER

69204_1

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") ...	306,361.	261,647.	225,120.	273,608.	298,750.	1365486.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf ...						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	306,361.	261,647.	225,120.	273,608.	298,750.	1365486.
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) ...						40,815.
6 Public support. Subtract line 5 from line 4						1324671.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	306,361.	261,647.	225,120.	273,608.	298,750.	1365486.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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						1365486.
12 Gross receipts from related activities, etc. (see instructions)					12	99,077.

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	97.01	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	92.86	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2013

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

b **33 1/3% support tests - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information (See instructions)

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, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013Open to Public
Inspection

Name of the organization

KAKO RETREAT CENTER

Employer identification number

94-3082094

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations

- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
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 percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		673,878.		673,878.
b Buildings		27,885.	1,081.	26,804.
c Leasehold improvements				
d Equipment		30,669.	16,726.	13,943.
e Other		18,638.	10,154.	8,484.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ► 723,109.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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:	
a	Donated services and use of facilities	2a
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIII.)	2d
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIII.)	4b
c	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Part V **Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: DAVID AND VERA PENZ

(C) PURPOSE OF LOAN: ASSIST ORGANIZATION'S FINANCIAL NEEDS FOR FUEL,
AIRPLANE EXPENSES, ETC.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

KAKO RETREAT CENTER

Employer identification number
94-3082094

FORM 990, PART VI, SECTION A, LINE 2:

EXPLANATION: OFFICERS DAVID PENZ AND VERA PENZ HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11:

**EXPLANATION: THE PRESIDENT AND TREASURER REVIEW THE FORM 990 IN DETAIL
PRIOR TO FILING, AND A COPY IS PROVIDED TO ALL DIRECTORS.**

FORM 990, PART VI, SECTION C, LINE 19:

**EXPLANATION: THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL
STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.**

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

SUPPLIES :

PROGRAM SERVICE EXPENSES	8,691.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	8,691.

MISSIONARY WORK EXPENSE :

PROGRAM SERVICE EXPENSES	6,433.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,433.

TELEPHONE AND SATELLITE :

PROGRAM SERVICE EXPENSES	6,328.
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
332211
09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization

KAKO RETREAT CENTER

Employer identification number

94-3082094

<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	6,328.

CONSULTING EXPENSES :

<u>PROGRAM SERVICE EXPENSES</u>	2,975.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	2,975.

FREIGHT AND POSTAGE :

<u>PROGRAM SERVICE EXPENSES</u>	2,595.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	2,595.

OFFICE EXPENSE :

<u>PROGRAM SERVICE EXPENSES</u>	0.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	2,250.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	2,250.

FINANCE CHARGES :

<u>PROGRAM SERVICE EXPENSES</u>	2,177.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	2,177.

Name of the organization

KAKO RETREAT CENTER

Employer identification number

94-3082094

CAMP COSTS :

<u>PROGRAM SERVICE EXPENSES</u>	2,001.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	2,001.

RETREATS AND WORKSHOPS :

<u>PROGRAM SERVICE EXPENSES</u>	1,130.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	1,130.

GIFTS :

<u>PROGRAM SERVICE EXPENSES</u>	349.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	349.

MISCELLANEOUS EXPENSES :

<u>PROGRAM SERVICE EXPENSES</u>	123.
<u>MANAGEMENT AND GENERAL EXPENSES</u>	0.
<u>FUNDRAISING EXPENSES</u>	0.
<u>TOTAL EXPENSES</u>	123.
<u>TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A</u>	35,052.

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	C Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Current Year Deduction	Beginning Accumulated Depreciation	Basis For Depreciation	Ending Accumulated Depreciation
BUILDINGS													
11 PIPES		09/08/11	SL	39.00	MM17	2,503.				83.			64.
12 FURNACES		07/01/12	SL	39.00	MM17	3,798.				45.			147.
13 SHOWERS AND SINKS		07/01/12	150DB	15.00	MQ17	2,110.				79.			142.
15 ALPINE WINDOWS		10/11/12	SL	39.00	MM17	587.				587.			203.
21 WELL PIPING SYSTEM		10/31/12	150DB	15.00	MQ17	2,894.				2,894.			282.
ADDITIONAL WELL PIPING													
22 SYSTEM		07/31/13	150DB	15.00	MQ19E	3,727.				3,727.			322.
23 BOILER FOR LODGE		12/23/13	SL	39.00	MM19I	8,381.				8,381.			140.
28 ROOFING FOR SAWMILL		10/14/13	SL	39.00	MM19I	3,885.				3,885.			140.
* 990 PAGE 10 TOTAL BUILDINGS						27,885.				27,885.			1,081.
FURNITURE & FIXTURES													
FURNITURE (2010 AND PRIOR 1 YEARS)													
01/01/11	200DB	7.00	HY17	15,820.						15,820.			8,901.
05/23/11	200DB	7.00	HY17	596.						596.			2,767.
05/05/12	200DB	7.00	MQ17	2,222.						2,222.			104.
18 FURNITURE													
* 990 PAGE 10 TOTAL FURNITURE & FIXTURES													
MACHINERY & EQUIPMENT													
EQUIPMENT (2010 AND PRIOR 2 YEARS)													
01/01/11	200DB	5.00	HY17	11,040.						11,040.			2,120.
01/18/11	200DB	5.00	HY17	915.						915.			7,861.
5 ARCTIC CAT													

32B111
05-01-13

(D) - Asset disposed

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

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	C Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Year Deduction	Current Sec 179 Expense	Ending Accumulated Depreciation
6	WATER PUMP	01/26/11	200DB	5.00	HY117	526.				526.	273.		101.	374.
7	BACK HOE	04/14/11	200DB	5.00	HY117	752.				752.	391.		144.	535.
8	4-WHEELERS	06/04/11	200DB	5.00	HY117	892.				892.	464.		171.	635.
9	TIRES	06/24/11	200DB	5.00	HY117	806.				806.	419.		155.	574.
10	D6 CAT	12/31/11	200DB	5.00	HY117	2,000.				2,000.	1,040.		384.	1,424.
14	SNOWMACHINES	10/11/12	200DB	5.00	MQ117	3,398.				3,398.	170.		1,291.	1,461.
16	WOOD SPLITTER	12/08/12	200DB	5.00	MQ117	500.				500.	25.		190.	215.
EQUIPMENT TIRES AND TIRE CHAINS														
17	CHAINS	07/01/12	200DB	5.00	MQ117	3,698.				3,698.	555.		1,257.	1,812.
19	SAWMILL EQUIPMENT	05/14/12	200DB	5.00	MQ117	781.				781.	195.		234.	429.
20	STIHL CHAINSAW	03/12/12	200DB	5.00	MQ117	741.				741.	259.		193.	452.
24	SISSION CHAINSAW	08/28/13	200DB	5.00	MQ119B	705.				705.			106.	106.
25	CHAINSAW MODEL 362	12/04/13	200DB	5.00	MQ119B	600.				600.			30.	30.
26	CHAINSAW MODEL 362	12/04/13	200DB	5.00	MQ119B	600.				600.			30.	30.
27	FOUR WHEELER	12/18/13	200DB	5.00	MQ119B	2,715.				2,715.			136.	136.
* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT														
LAND	BUILDINGS/LAND (2010 AND 3 PRIOR YEARS)	01/01/11 L				30,669.				30,669.	10,008.		6,718.	16,726.
* 990 PAGE 10 TOTAL LAND														
						673,878.				673,878.	0.		0.	0.

3281113
05-01-13

(D) - Asset disposed

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

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

Asset No	Description	Date Acquired	Method	Life	C Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
* GRAND TOTAL 990 PAGE 10	DEPR					751,070.				751,070.	17,016.		10,945.	27,961.

328111
05-01-13

(D) - Asset disposed

29.3

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

Form 4562

Department of the Treasury
Internal Revenue Service (99)Depreciation and Amortization 990
(Including Information on Listed Property)

OMB No 1545-0172

2013

Attachment
Sequence No 179

Name(s) shown on return

Business or activity to which this form relates

Identifying number

KAKO RETREAT CENTER

FORM 990 PAGE 10

94-3082094

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7 Listed property. Enter the amount from line 29	7		
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction. Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562	10		
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11		
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12		
13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property) (See instructions.)

Section A						
17 MACRS deductions for assets placed in service in tax years beginning before 2013	17	10,473.				
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here			►			

Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		4,620.	5 YRS.	MQ	200DB	302.
c 7-year property						
d 10-year property						
e 15-year property		3,727.	15 YRS.	MQ	150DB	140.
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	12/13	8,381.	39 yrs.	MM	S/L	9.
	10/13	3,885.	39.0 YRS	MM	S/L	21.

Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs.	S/L	
c 40-year	/		40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	22	10,945.
Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.		
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

316251
12-19-13 LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2013)

14031113 759209 69204

2013.04030 KAKO RETREAT CENTER

69204_1

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	----------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

26 Property used more than 50% in a qualified business use:

	%							
	%							
	%							

27 Property used 50% or less in a qualified business use:

	%				S/L -			
	%				S/L -			
	%				S/L -			

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

Section B - Information on Use of Vehicles

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

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

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

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

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? **Yes** **No**
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners **Yes** **No**
39 Do you treat all use of vehicles by employees as personal use? **Yes** **No**
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? **Yes** **No**
41 Do you meet the requirements concerning qualified automobile demonstration use? **Yes** **No**

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	---------------------------------	---------------------------	---------------------	--	-----------------------------------

42 Amortization of costs that begins during your 2013 tax year:

43 Amortization of costs that began before your 2013 tax year **43**

44 Total. Add amounts in column (f). See the instructions for where to report **44**

Client: **Kako Retreat Center**
 Engagement: **Kako Retreat Center**
 Period Ending: **12/31/2013**
 Workpaper: **All Accounts**

Account	Description	UNADJ 12/31/2013	JE Ref #	AJE	ADJ	1st PP-Adj	\$ VAR				
					12/31/2013	12/31/2012					
Group : [9000] All Accounts											
Subgroup : None											
12000	Undeposited Funds	700.00	AJE - 13	(700.00) (700.00)	0.00	0.00	0.00				
15000	Furniture	0.00	AJE - 1	18,638.15 16,416.38	18,638.15	18,638.15	0.00				
			AJE - 2	2,221.77							
15050	Equipment	0.00	AJE - 1	30,668.11 16,930.57	30,668.11	26,048.34	4,619.77				
			AJE - 2	9,117.77							
			AJE - 10	4,619.77							
15100	Buildings/Land	0.00	AJE - 1	701,763.88 676,381.37	701,763.88	685,771.25	15,992.63				
			AJE - 2	9,389.88							
			AJE - 10	15,992.63							
15500	Accumulated Depreciation	0.00	AJE - 1	(27,961.00) (5,749.00)	(27,961.00)	(17,016.00)	(10,945.00)				
			AJE - 2	(11,267.00)							
			AJE - 3	(10,945.00)							
20000	Accounts Payable	40.00	AJE - 1	(40.00) (40.00)	0.00	0.00	0.00				
24000	Payroll Liabilities	(0.02)	AJE - 1	0.02	0.00	0.00	0.00				
			AJE - 1	0.02							
25400	Loan Penz	0.00	AJE - 1	(17,800.00) (28,800.00)	(17,800.00)	(21,800.00)	4,000.00				
			AJE - 2	7,000.00							
			AJE - 8	4,000.00							
25450	Loan FNB	0.00	AJE - 1	0.00 (12,844.43)	0.00	0.00	0.00				
			AJE - 2	12,844.43							
25460	FNBA Fuel Loan	0.00	AJE - 2	0.00 (7,247.62)	0.00	(7,247.62)	7,247.62				
			AJE - 9	3,668.02							
			AJE - 11	3,579.60							
25470	FNBA Commercial P&I Loan	0.00	AJE - 9	(24,001.00) 16,574.00	(24,001.00)	0.00	(24,001.00)				
			AJE - 12	(40,575.00)							
32000	Unrestricted Net Assets	(10,714.39)	AJE - 1	(686,582.57) (662,168.86)	(697,296.96)	(664,640.79)	(32,656.17)				
			AJE - 2	(24,413.71)							
40000	First National Bank of Alaska	41,200.29	AJE - 1	(1,136.93) (126.05)	40,063.36	12,902.84	27,160.52				
			AJE - 2	2,354.48							
			AJE - 11	(3,365.36)							
43400	General Fund Income	(500.00)		0.00	(500.00)	0.00	(500.00)				
43401	KAKO DONATIONS	(211,403.65)		435.76	(210,967.89)	(154,426.49)	(56,541.40)				
			AJE - 5	(50.00)							
			AJE - 11	(214.24)							
			AJE - 13	700.00							
43402	Aviation Fuel	(11,990.00)		0.00	(11,990.00)	(8,075.00)	(3,915.00)				
43408	- Loan	(40,080.77)		40,050.00	(30.77)	0.00	(30.77)				
			AJE - 5	50.00							
			AJE - 12	40,000.00							
43409	Volunteer Help	(11,420.00)		0.00	(11,420.00)	(4,289.00)	(7,131.00)				
43411	Camp Registration	(12,605.00)		2,785.00	(9,820.00)	(11,965.00)	2,145.00				
			AJE - 4	2,785.00							

Client: **Kako Retreat Center**
 Engagement: **Kako Retreat Center**
 Period Ending: **12/31/2013**
 Workpaper: **All Accounts**

Account	Description	UNADJ	JE Ref #	AJE	ADJ	1st PP-Adj	\$ VAR
		12/31/2013			12/31/2013	12/31/2012	
43412	Cessna 206	(2,026.93)		0.00	(2,026.93)	(30,710.00)	28,683.07
43414	Retreats & Workshops	(3,264.00)		0.00	(3,264.00)	(3,941.00)	677.00
43416	Housing	(2,300.00)		0.00	(2,300.00)	(6,400.00)	4,100.00
43418	Office	(4,526.40)		776.40	(3,750.00)	(1,167.05)	(2,582.95)
			AJE - 7	776.40			
43419	Camp Scholarships	(5,852.32)		0.00	(5,852.32)	(4,397.14)	(1,455.18)
43420	Reimbursement	(2,000.00)		0.00	(2,000.00)	0.00	(2,000.00)
43421	Groceries	(1,665.98)		0.00	(1,665.98)	(216.83)	(1,449.15)
43425	Propane	(35.00)		0.00	(35.00)	(800.00)	765.00
43426	Snackshop	0.00		(2,785.00)	(2,785.00)	(2,667.00)	(118.00)
			AJE - 4	(2,785.00)			
43427	Camp Equipment	0.00		0.00	0.00	(4,916.80)	4,916.80
44817	Outgoing	0.00		0.00	0.00	(1,061.70)	1,061.70
44818	Gifts	0.00		0.00	0.00	(25.00)	25.00
44831	Support	(5,120.00)		0.00	(5,120.00)	(6,430.00)	1,310.00
44841	Support	(31,808.30)		0.00	(31,808.30)	(33,223.50)	1,415.20
44842	Gifts	(349.00)		0.00	(349.00)	(573.00)	224.00
44881	Support	(13,522.37)		0.00	(13,522.37)	(14,920.23)	1,397.86
44882	Outgoing	0.00		0.00	0.00	(2,000.00)	2,000.00
44925	Brewer Outgoing	0.00		0.00	0.00	1,086.70	(1,086.70)
44926	Brewer Housing	0.00		0.00	0.00	600.00	(600.00)
44933	Salary	4,756.18		0.00	4,756.18	5,972.84	(1,216.66)
44943	Salary	24,898.82		0.00	24,898.82	25,079.16	(180.34)
44945	Work	5,709.77		0.00	5,709.77	6,944.43	(1,234.66)
44946	Office	1,200.00		0.00	1,200.00	1,200.00	0.00
44947	Gifts	349.00		0.00	349.00	573.00	(224.00)
44971	Salary	9,195.50		0.00	9,195.50	9,981.81	(786.31)
44972	Housing	2,350.00		0.00	2,350.00	2,400.00	(50.00)
44973	Work	723.50		0.00	723.50	1,175.00	(451.50)
44974	Office	550.00		0.00	550.00	600.00	(50.00)
44976	Outgoing	0.00		0.00	0.00	1,888.93	(1,888.93)
45010	Snack Shop	1,131.92		0.00	1,131.92	1,206.62	(74.70)
45015	Camp	2,001.08		0.00	2,001.08	2,589.06	(587.98)
45016	Camp Promotion	0.00		0.00	0.00	800.00	(800.00)
45017	Camp Travel	562.79		0.00	562.79	3,315.00	(2,752.21)
45020	Cessna 206	15,673.12		0.00	15,673.12	33,208.18	(17,535.06)
45021	Insurance	8,016.60		(220.40)	7,796.20	11,215.96	(3,419.76)
			AJE - 7	(220.40)			
45023	182	13,112.88		0.00	13,112.88	0.00	13,112.88
45025	Groceries	25,088.31		0.00	25,088.31	17,786.20	7,302.11
45045	Library	110.63		0.00	110.63	0.00	110.63
45055	Travel	4,298.52		0.00	4,298.52	548.00	3,750.52
45056	Retreats	1,130.00		0.00	1,130.00	0.00	1,130.00
45057	Help	10,813.47		0.00	10,813.47	1,314.00	9,499.47
46000	Kako Operations Expense - Other	0.00		0.00	0.00	24.98	(24.98)
46010	Building Maint.	1,028.60		0.00	1,028.60	2,986.51	(1,957.91)
46011	Penz Loan	4,000.00		(4,000.00)	0.00	0.00	0.00
			AJE - 8	(4,000.00)			
46020	Fuel Loan	21,223.72		(21,223.72)	0.00	0.00	0.00
			AJE - 9	(21,223.72)			
46030	Equipment	0.00		0.00	0.00	1,000.00	(1,000.00)
46031	Freight	57.15		0.00	57.15	0.00	57.15
46032	Purchase	2,337.00		(2,037.00)	300.00	453.10	(153.10)
			AJE - 10	(2,037.00)			
46033	Parts and Maintenance	7,769.96		(2,582.77)	5,187.19	4,921.80	265.39
			AJE - 10	(2,582.77)			
46040	Expansion	0.00		0.00	0.00	951.45	(951.45)

Client: **Kako Retreat Center**
 Engagement: **Kako Retreat Center**
 Period Ending: **12/31/2013**
 Workpaper: **All Accounts**

Account	Description	UNADJ	JE Ref #	AJE	ADJ	1st PP-Adj	\$ VAR
		12/31/2013			12/31/2013	12/31/2012	
46050	Fuel	50,000.00		0.00	50,000.00	5,233.06	44,766.94
46051	Diesel	31,532.75		0.00	31,532.75	29,526.80	2,005.95
46052	Aviation Gas	20,764.91		0.00	20,764.91	33,851.12	(13,086.21)
46053	Propane	3,621.97		0.00	3,621.97	3,807.25	(185.28)
46054	Regular gas	131.96		0.00	131.96	640.90	(508.94)
46060	Furnishing	8,696.62		(8,380.62)	316.00	410.72	(94.72)
			AJE - 10	(8,380.62)			
46070	IA Maintenance	89.15		0.00	89.15	0.00	89.15
46080	Light Plant	1,363.44		0.00	1,363.44	4,799.91	(3,436.47)
46090	Office	0.00		0.00	0.00	2,135.52	(2,135.52)
46091	Telephone	743.49		0.00	743.49	609.95	133.54
46092	Satellite	5,584.55		0.00	5,584.55	5,607.93	(23.38)
46093	Postage	2,538.03		0.00	2,538.03	2,326.23	211.80
46094	Bank service charges	879.40		575.00	1,454.40	3,110.48	(1,656.08)
			AJE - 12	575.00			
46095	Supplies	3,832.47		0.00	3,832.47	783.93	3,048.54
46100	Expense Reimbursement	2,500.00		0.00	2,500.00	0.00	2,500.00
46107	Depreciation Expense	0.00		10,945.00	10,945.00	11,267.00	(322.00)
			AJE - 3	10,945.00			
46108	Interest Expense	0.00		981.70	981.70	950.20	31.50
			AJE - 9	981.70			
46109	Finance Charges	722.74		0.00	722.74	1,533.61	(810.87)
46110	Sawmill	3,885.43		(3,885.43)	0.00	100.76	(100.76)
			AJE - 10	(3,885.43)			
46126	Equipment Purchase	1,325.41		0.00	1,325.41	0.00	1,325.41
46127	Supplies	3,708.10		0.00	3,708.10	2,697.68	1,010.42
46128	Oxygen	1,150.63		0.00	1,150.63	783.14	367.49
46129	Oil	4,742.12		0.00	4,742.12	2,532.28	2,209.84
46130	Vehicles	12.28		0.00	12.28	0.00	12.28
46140	Well	3,726.58		(3,726.58)	0.00	0.00	0.00
			AJE - 10	(3,726.58)			
46150	Wood Shop	0.00		0.00	0.00	754.33	(754.33)
46904	Licenses and Fees	0.00		0.00	0.00	85.00	(85.00)
46905	Accounting Expenses	0.00		3,340.00	3,340.00	3,130.00	210.00
			AJE - 6	3,340.00			
46907	Workers Compensation	2,221.00		(556.00)	1,665.00	2,260.00	(595.00)
			AJE - 7	(556.00)			
46908	Taxes	3,340.00		(3,340.00)	0.00	0.00	0.00
			AJE - 6	(3,340.00)			
46909	Consultation	2,975.00		0.00	2,975.00	0.00	2,975.00
66000	Payroll Expenses	1,067.29		0.00	1,067.29	1,220.54	(153.25)
THG_01	Non-cash Contributions	0.00		0.00	0.00	(432.50)	432.50
Subtotal : None		0.00		0.00	0.00	(0.00)	0.00
Total [9000] All Accounts		0.00		0.00	0.00	(0.00)	0.00

Client: **Kako Retreat Center**
 Engagement: **Kako Retreat Center**
 Period Ending: **12/31/2013**
 Workpaper: **Adjusting Journal Entries Report**

Account	Description	W/P Ref	Debit	Credit
Adjusting Journal Entries JE # 1				PY
To record prior years journal entries				
15000	Furniture		16,416.38	
15050	Equipment		16,930.57	
15100	Buildings/Land		678,381.37	
24000	Payroll Liabilities		0.02	
15500	Accumulated Depreciation			5,749.00
20000	Accounts Payable			40.00
25400	Loan Penz			28,800.00
25450	Loan FNB			12,844.43
32000	Unrestricted Net Assets			662,168.86
40000	First National Bank of Alaska			126.05
Total			709,728.34	709,728.34
Adjusting Journal Entries JE # 2				PY
To record 2012 journal entries				
15000	Furniture		2,221.77	
15050	Equipment		9,117.77	
15100	Buildings/Land		9,389.88	
25400	Loan Penz		7,000.00	
25450	Loan FNB		12,844.43	
40000	First National Bank of Alaska		2,354.48	
15500	Accumulated Depreciation			11,267.00
25460	FNBA Fuel Loan			7,247.62
32000	Unrestricted Net Assets			24,413.71
Total			42,928.33	42,928.33
Adjusting Journal Entries JE # 3				4700
To record current year depreciation expense				
48107	Depreciation Expense		10,945.00	
15500	Accumulated Depreciation			10,945.00
Total			10,945.00	10,945.00
Adjusting Journal Entries JE # 4				7010
To reclass snack shop sales out of camp registration				
Income				
43411	Camp Registration		2,785.00	
43426	Snackshop			2,785.00
Total			2,785.00	2,785.00

Client: **Kako Retreat Center**
 Engagement: **Kako Retreat Center**
 Period Ending: **12/31/2013**
 Workpaper: **Adjusting Journal Entries Report**

Account	Description	W/P Ref	Debit	Credit
	Adjusting Journal Entries JE # 5	5000		
	To reclass contribution out of loan income			
43408	- Loan		50.00	
43401	KAKO DONATIONS			50.00
Total			50.00	50.00
	Adjusting Journal Entries JE # 6	7035.91		
	To reclass accountingl fees out of tax expense			
46905	Accounting Expenses		3,340.00	
46908	Taxes			3,340.00
Total			3,340.00	3,340.00
	Adjusting Journal Entries JE # 7	7035.66		
	To reclass insurance refunds out of office income and to insurance expense			
43418	Office		776.40	
45021	Insurance			220.40
46907	Workers Compensation			556.00
Total			776.40	776.40
	Adjusting Journal Entries JE # 8	5000		
	To reclass Penz loan transactions included in income and expense to balance sheet loan accounts and to tie			
25400	Loan Penz		4,000.00	
46011	Penz Loan			4,000.00
Total			4,000.00	4,000.00
	Adjusting Journal Entries JE # 9	5000		
	To reclass FNBA loan amounts included in income and expense to balance sheet loan accounts and to tie out			
25460	FNBA Fuel Loan		3,668.02	
25470	FNBA Commercial P&I Loan		16,574.00	
46108	Interest Expense		981.70	
46020	Fuel Loan			21,223.72
Total			21,223.72	21,223.72
	Adjusting Journal Entries JE # 10	4705		
	To reclass repair and maintenance expenses as assets			
15050	Equipment		4,619.77	
15100	Buildings/Land		15,992.63	
46032	Purchase			2,037.00
46033	Parts and Maintenance			2,582.77
46060	Furnishing			8,380.62
46110	Sawmill			3,885.43
46140	Well			3,726.58
Total			20,612.40	20,612.40

Client: **Kako Retreat Center**
 Engagement: **Kako Retreat Center**
 Period Ending: **12/31/2013**
 Workpaper: **Adjusting Journal Entries Report**

Account	Description	W/P Ref	Debit	Credit
	Adjusting Journal Entries JE # 11	4000		
	To tie out ending cash balance			
25460	FNBA Fuel Loan		3,579.60	
40000	First National Bank of Alaska			3,365.36
43401	KAKO DONATIONS			214.24
Total			<u>3,579.60</u>	<u>3,579.60</u>
	Adjusting Journal Entries JE # 12	5005		
	To record new FNBA commerical P&I loan			
43408	- Loan		40,000.00	
46094	Bank service charges		575.00	
25470	FNBA Commercial P&I Loan			40,575.00
Total			<u>40,575.00</u>	<u>40,575.00</u>
	Adjusting Journal Entries JE # 13	TB		
	To adjust undeposited funds balance to zero			
43401	KAKO DONATIONS		700.00	
12000	Undeposited Funds			700.00
Total			<u>700.00</u>	<u>700.00</u>