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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2013

OMB No 1545 1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

lnformation about Form 990-EZ and its instructions is at www.irs.gov/form990.

Inspection

		e 2013 calendar year, or tax year beginning 7/01 , 2013, and ending 6/30		2014	
		applicable C D Em	ployer id	entification number	
ᆿ	Name cl	hange MAINE YOUTH CAMPING FOUNDATION 0	01-0380077		
П	Initial re	hun D/B/A MAINE SUMMER CAMPS E Tel	ephone n	umber	
Ħ	Termina	PO BOX 1861 2	07-51	L8-9557	
=		IPORTLAND, ME 04104	oun Ex	emption	
	Applicat		mber	►	
G	Accou	inting Method. ☐ Cash X Accrual Other (specify) ► H Check ► X	if the	organization is not	
1	Websi	ite: NWW.MAINECAMPS.ORG required to	attach S	Schedule B (Form	
J	Tax-ex	empt status (check only one) — X 501(c)(3) 501(c) () ◀(insert no) 4947(a)(1) or 527 990, 990-EZ	, or 99	0-Pf). 	
		of organization. X Corporation Trust Association Other			
L	Add In	nes 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total is (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	► \$	_ 148,553.	
P		Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruc	tions		
تقديقنا		Check if the organization used Schedule O to respond to any question in this Part I		X	
	1	Contributions, gifts, grants, and similar amounts received	1	7,695.	
	ŀ	Program service revenue including government fees and contracts	2	58,433.	
	l	Membership dues and assessments	3	78,946.	
`	4	Investment income	4	500.	
•		Gross amount from sale of assets other than inventory 5 a			
	_	Less, cost or other basis and sales expenses 5b	1]		
i	_	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5 c		
j		Gaming and fundraising events			
R	i -	Gross income from gaming (attach Schedule G if greater than \$15,000).			
REVE		Gross income from fundraising events (not including \$ of contributions	1 1		
⊒ N U		from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)			
, E	_ c	Less direct expenses from gaming and fundraising events 6c	1 1		
2014	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6 d		
	7 a	Gross sales of inventory, less returns and allowances 7 a			
	ь	Less cost of goods sold	1		
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) Other revenue (describe in Schedule O) SEE—SCHEDULE O	7 c		
	8	Office revenue (describe in deficable o)	8	2,979.	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8.	9	148,553.	
	10	Grants and similar amounts paid (list in Schedule O)	10		
	11	Benefits paid to or for members	11		
E	12	Salaries, other compensation, and employee benefits.	12	42,378.	
E X P E N	13	Professional fees and other payments to independent contractors	13		
	14	Occupancy, rent, utilities, and maintenance	14	5,561.	
S E	15	Printing, publications, postage, and shipping	15	9,401.	
S	16	Other expenses (describe in Schedule O) SEE SCHEDULE O	16	62,768.	
	17	Total expenses: Add lines 10 through 16	17	120,108.	
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	28,445.	
A					
NS EETT	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	233,929.	
TT	20	Other changes in net assets or fund balances (explain in Schedule O)	20		
-	21	Net assets or fund balances at end of year Combine lines 18 through 20	- 21	262,374.	
B	ч	r Paperwork Reduction Act Notice, see the separate instructions.	1	Form 990-EZ (2013)	

TEEA0812L 11/27/13

BAA

01-0380077

Page 2

Form **990-EZ** (2013)

43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	1	-	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year		Ш	N/A
			Yes	No
44	a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a	·	Х
	b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 b		Х
	c Did the organization receive any payments for indoor tanning services during the year?	44 c		X
	d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	44 d		
45	a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	45 a		X
	b 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,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45 b		Х
	TEEA0812L 11/27/13	Form 99	0-EZ	(2013)

Form 990-E	Z (2013) MAINE YOUTH CAMPING	FOUNDATION		01-038	0077	P;	age 4
						Yes	No
46 Did th	ne organization engage, directly or indirect dates for public office? If 'Yes,' complete	tly, in political campaig Schedule C, Part t	n activities on behalf of	or in opposition to	46		X
Part VI	Section 501(c)(3) organizations	only				L	
	All section 501(c)(3) organization for lines 50 and 51.	ons must answer q	uestions 47-49b ar	nd 52, and complete	e the table	es	
	Check if the organization used Schedule	O to respond to any q	uestion in this Part VI				П
45 0.40						Yes	No
comp	ne organization engage in lobbying activiti ilete Schedule C, Part II				es, 47		Х
	e organization a school as described in se			ule E	48		<u>X</u>
	ne organization make any transfers to an o		related organization?		49 a		<u>X</u> _
	s,' was the related organization a section plete this table for the organization's five t	•	molovees (other than of	ficers directors trustee	49b		
emplo	oyees) who each received more than \$100	0,000 of compensation	from the organization. If	there is none, enter 'N	one.'		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W 2/1099 MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated other comp		
NONE							
 							—
f Total	number of other employees paid over \$1	00,000	-I		<u> </u>		
51 Comp	plete this table for the organization's five I pensation from the organization. If there is	highest compensated in	ndependent contractors	who each received more	e than \$100,	000 of	
	(a) Name and business address of each independent of		(b) Type	of service	(c) Compe	ensation	
	(c) the discount of the discou		(2) 1) 50		(4) 55		
NONE _							
							
							
d Total	number of other independent contractors	s each receiving over \$	100,000	>	<u> </u>		
	he organization complete Schedule A? No table trusts must attach a completed Sch		3) organizations and 494	7(a)(1) nonexempt	► X Yes		No
Under penalties	s of penjury, I declare that I have examined this return, incl and complete. Declaration of preparer (other than office	uding accompanying schedules	and statements, and to the best of	my knowledge and belief, it is			
Correct, a	and complete Declaration of preparer (other than office	er) is based on all information	of which preparer has any kno	wiedge			
Sign Here	Signature of officer Type or print name and title	ton		Date TREASURER EXE	ntwi	<u>D</u> ,	<u> </u>
	Print/Type preparer's name	Preparer's signature	Date	, , , , ,	PTIN		
Paid	JANET N. O'TOOLE, CPA, PFS	funt NG	zn_ 11/10,	Check Lif Self employed	200566901		
Preparer	Firm's name MONECK O'TOOLE CPA	√s_					
Use Only	Firm's address ► 511 CONGRESS ST SU	ITE 900		Firm's EIN ►	01-039817	4	
	PORTLAND, ME 04101			Phone no (20	7) 774-088	2	
May the IR	RS discuss this return with the preparer sh	nown above? See instru	uctions		► X Yes		No
			· · · · · · · · · · · · · · · · · · ·		Form 99	0-F7 (20131

SCHEDULE A (Form 990 or 990-EZ)

Total

Public Charity Status and Public Support

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

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

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number MAINE YOUTH CAMPING FOUNDATION D/B/A MAINE SUMMER CAMPS 01-0380077 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h Type III - Non-functionally integrated Type III - Functionally integrated ď Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) 11 q (i) below, the governing body of the supported organization? A family member of a person described in (i) above? 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (VII) Amount of monetary (iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) (iv) Is the organization in column (i) listed in (v) Did you notify (vi) Is the (i) Name of supported (ii) EIN organization in column (i) organized in the US? the organization in column (i) of your support? organization support your governing document? Yes No Yes No Yes Nο (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2013

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)

Sect	ion A. Public Support							
	dar year (or fiscal year ning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')							
_	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							· · · · · ·
_	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4					‡ ‡		
Sec	tion B. Total Support						·	
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Tota	1
7	Amounts from line 4							
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							
12	Gross receipts from related activ	vities, etc (see ins	structions)			1	2	
13	First five years. If the Form 990 organization, check this box and	is for the organiz I stop here	ation's first, secor	nd, third, fourth, c	or fifth tax year as	a section 501(c))(3)	-
	tion C. Computation of Pu							
	Public support percentage for 20			ne 11, column (f))	ı	}	14	<u>%</u>
_	Public support percentage from					L-	15	%_
16 a	a 33-1/3% support test — 2013. If and stop here. The organization	the organization qualifies as a pu	did not check the iblicly supported o	box on line 13, a rganization	nd the line 14 is 33	3-1/3% or more,	, check this box	► []
ı	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							
17	17 a 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							
	b 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the 'facts nd-circumstances'	-and-circumstance ' test. The organiz	s' test, check this ation qualifies as	s box and stop he a publicly support	re. Explain in Pa led organization	art IV how the	• [
18	Private foundation. If the organ	ization did not ch	eck a box on line	13, 16a, 16b, 17a	i, or 17b, check the	s box and see i	nstructions	
BAA	1			-	S	chedule A (Forr	n 990 or 990-EZ) 2013

MAINE YOUTH CAMPING FOUNDATION

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.)

Sect	tion A. Public Support								
	lar year (or fiscal yr 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					21 225	001 101		
	any 'unusual grants.')	55,860.	70,878.	20,777.	61,681.	81,925.	291,121.		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's	52 672	144 520	121 710	62.710	63,149.	455,778.		
_	tax-exempt purpose	53,672.	144,529.	131,710.	62,718.	03,143.	433,770.		
	Gross receipts from activities that are not an unrelated trade or business under section 513						0.		
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
6	Total. Add lines 1 through 5	109,532.	215,407.	152,487.	124,399.	145,074.	746,899.		
	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.		
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13					0.	0.		
	for the year	0.	0.	0.	0.	0.	0.		
	: Add lines 7a and 7b	0.	0.	0.	0.	0.	<u> </u>		
	Public support (Subtract line 7c from line 6)						746,899.		
	tion B. Total Support				T (P 0010	T (2) 2012	/O Total		
	idar year (or fiscal yr beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
_	Amounts from line 6	109,532.	215,407.	152,487.	124,399.	145,074.	746,899.		
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable	493.	560.	680.	538.	500.	2,771.		
,	income (less section 511 taxes) from businesses acquired after June 30, 1975						0.		
	c Add lines 10a and 10b.	493.	560.	680.	538.	500.	2,771.		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain IV)	534.	599.	345	. 739.	2,979.	5,196.		
12	-	110,559.	216,566.	153,512			754,866.		
13									
14	First five years. If the Form 990 organization, check this box and ction C. Computation of Pt	stop nere			i illili tax year as	a section 301(c)(3)	▶ □		
				e 13 column (f)\	· · · · · · · · · · · · · · · · · · ·	15	98.94 %		
15				6 13, CUIUITIII (I))		16	98.84 %		
16						10	98.84 0		
	Section D. Computation of Investment Income Percentage								
	17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)).								
18						18	0.70 %		
19	a 33-1/3% support tests — 2013. It is not more than 33-1/3%, check	k this box and sto j	p here. The organ	ization qualifies a	as a publicly suppi	orted organization	- X		
	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								

Schedule A	(Form 990 or 990-EZ) 2013	MAINE YOUTH	CAMPING FOUND	ATION	01-0380077_	Page 4
Part IV	Supplemental Informat or 17b; and Part III, line (See instructions).	ion. Provide the 12. Also comple	explanations receive this part for a	quired by Part II, lining additional inforr	ne 10; Part II, line 17a mation.	
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Schedule A (Form 990 or 990-EZ) 2013

BAA

SCHEDULE 0 (Form 990 or 990-EZ)

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.

OMB No 1545 0047

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Department of the Treasury Internal Revenue Service

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

Employer identification number
01-0380077
ECREATIONAL
BENEFIT CONTRACTS
DIRECTLY OR
NO
CTLY OR
NO
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SCHEDULE O - SUPPLEME MAINE YOUTH CAMPING D/B/A MAINE SUMM	G FOUNDATION
FORM 990-EZ, PART I, LINE 8 OTHER REVENUE	
MISCELLANEOUS INCOME	TOTAL \$ 2,979
FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES	
ADVERTISING AND PROMOTION BANK SERVICE CHARGES CAMP FAIR COMPUTER SUPPLY CONSULTANTS DEPRECIATION DIRECTORY POSTAGE INSURANCE INTERNET & WEB FEES JUNIR MAINE GUIDE MAILING LISTS MARKETING CAMPAIGN EXPENSE MEETINGS/SPEAKERS MISCELLANEOUS OFFICE SUPPLIES PAYROLL SERVICE FEES TELEPHONE TRAVEL	\$ 4,085 64 4,525 999 31,030 154 1,801 1,424 2,259 1,659 4,714 3,236 449 1,879 889 1,238 1,238 1,823
FORM 990-EZ, PART II, LINE 24 OTHER ASSETS	
MACHINERY AND EQUIPMENT PREPAID EXPENSES AND DEFERRED CHARGES	BEGINNING         ENDING           \$ 385.         \$ 2           299.         1           TOTAL         \$ 684.         \$ 3

FORM 990-EZ,	<b>PART</b>	11,	LINE 26
<b>TOTAL LIABIL</b>		•	

	BE	GINNING	ENDING
ACCOUNTS PAYABLE AND ACCRUED EXPENSES CONTRIBUTIONS PAYABLE TO MYCA DEFERRED REVENUE	\$ TOTAL \$	100. 30,773. 57,324.	\$ 2,457. 28,524. 71,628. \$ 102,609
	1011111 9	00,107.	<del>\$ 102,003.</del>

2013

# SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5 MAINE YOUTH CAMPING FOUNDATION D/B/A MAINE SUMMER CAMPS 01-0380077

PART III,	LINE '	12 - (	THER	INCOME
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NATURE AND SOURCE	2013	2012	2011	2010	2009
MISCELLANEOUS INCOME	\$ 2,979.	\$ 739.	\$ 345.	\$ 599.	\$ 534.
	\$ 2,979.	\$ 739.	\$ 345.	\$ 599.	\$ 534.