

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning **03/01/10**, and ending **02/28/11**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization **Camp Jorn Young Men's Christian Association, Inc.**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
28 Red Feather Road, P.O. Box 430
 City or town, state or country, and ZIP + 4
Manitowish WI 54545-0430

D Employer identification number
54-2184387

E Telephone number
847-271-0715

G Gross receipts \$ **2,127,734**

F Name and address of principal officer:
Robert Eshoo
2020 Swainwood Drive
Glenview IL 60025

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

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **campjornymca.org** **H(c)** Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **2005** **M** State of legal domicile: **WI**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Programs that promote healthy lifestyles, strong values, leadership development, community interaction, and international understanding.		
	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	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	88
	6 Total number of volunteers (estimate if necessary)	6	205
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	1,608,129	1,524,558
	9 Program service revenue (Part VIII, line 2g)	504,454	469,720
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	49,999	105,518
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,783	27,686
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,180,365	2,127,482
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	383,296	494,295
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,399		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	455,362	425,644	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	838,658	919,939	
19 Revenue less expenses. Subtract line 18 from line 12	1,341,707	1,207,543	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 8,975,222	End of Year 9,897,446
	21 Total liabilities (Part X, line 26)	619,650	334,331
	22 Net assets or fund balances. Subtract line 21 from line 20	8,355,572	9,563,115

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

Signature of officer: **Gerold Topcik** Treasurer
 Date: _____
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **M. David Cain**
 Preparer's signature: *[Signature]*
 Date: **8-16-10**
 Check if self-employed
 PTIN: **P00925125**

Firm's name: **Milburn Cain & Co.**
 Firm's address: **4237 Grove Avenue, Gurnee, IL 60031**
 Firm's EIN: _____
 Phone no.: **847-336-6455**

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

Programs that promote healthy lifestyles, strong values, leadership development, community interaction, and international understanding.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ **720,658** including grants of \$) (Revenue \$ **651,491**)
Resident Camp

4b (Code:) (Expenses \$ **89,151** including grants of \$) (Revenue \$ **116,909**)
Child Care

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

4d Other program services. (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$ **19,996**)

4e Total program service expenses **809,809**

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)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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? If "Yes," complete Schedule C, Part II		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? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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? If "Yes," complete Schedule D, Part VII		X
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? If "Yes," complete Schedule D, Part VIII		X
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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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		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 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		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		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		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):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		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	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		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		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a 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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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		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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
4b	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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
6b	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	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	X	
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			X
9 Sponsoring organizations maintaining donor advised funds.			
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:			
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11 Section 501(c)(12) organizations. Enter:			
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
12a			
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a Did the organization receive any payments for indoor tanning services during the tax year?			
14a			X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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 to any question 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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
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		X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	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?		
15a	a The organization's CEO, Executive Director, or top management official	X	
15b	b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		X
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?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **IL, WI**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **Gerold Topcik** 13880 West Russell Road
Zion IL 60099 847-271-0715

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question 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 organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Robert Runyan Director	0.00	X					0	0	0	
(2) Daniel Drury Director	0.00	X					0	0	0	
(3) Gerold Topcik Treasurer	0.00	X		X			0	0	0	
(4) Robert Brooks Director	0.00	X					0	0	0	
(5) Frank Davis Director	0.00	X					0	0	0	
(6) Carol Detwiler Secretary	0.00	X					0	0	0	
(7) Mathew Sullian Director	0.00	X					0	0	0	
(8) Robert Eshoo Chairman	0.00	X		X			0	0	0	
(9) Rick Gering Director	0.00	X					0	0	0	
(10) Claudia Hoogasian Director	0.00	X					0	0	0	
(11) Larry Kilpatrick Director	0.00	X					0	0	0	
(12) Anthony Krause Director	0.00	X					0	0	0	
(13) Jason Ribondo Director	0.00	X					0	0	0	
(14) Richard Ribondo Vice Chairman	0.00	X		X			0	0	0	
(15) Cheryl Sanderlin Director	0.00	X					0	0	0	
(16) Ronald Sanderlin Director	0.00	X					0	0	0	

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) Andrew Stoll Director	0.00	X					0	0	0	
(18) Amanda Kimmel Secretary	0.00	X		X			0	0	0	
(19) Randy L. Copenharve Jr. Director	0.00	X					0	0	0	
(20) Robert Hughes Director	0.00	X					0	0	0	
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
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		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		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		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.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	18,203				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,506,355				
	g Noncash contributions included in lines 1a-1f:		\$ 11,480				
	h Total. Add lines 1a-1f		1,524,558				
Program Service Revenue		Busn. Code					
	2a Resident Camp		290,116	290,116			
	b Child Care		159,608	159,608			
	c Facility Rentals		19,996	19,996			
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f		469,720					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		103,004	14,820		88,184	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross Rents	(i) Real					
		(ii) Personal					
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets	(i) Securities					
		(ii) Other		2,766			
	b Less: cost or other basis & sales exps.			252			
	c Gain or (loss)			2,514			
	d Net gain or (loss)			2,514		2,514	
	8a 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							
9a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Busn. Code					
11a Special Events			21,254	21,254			
b Trading Post			6,829	6,829			
c Other Income			4,271	4,271			
d All other revenue			-4,668	-4,668			
e Total. Add lines 11a-11d			27,686				
12 Total revenue. See instructions.			2,127,482	512,226	0	90,698	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	422,705	349,069	73,636	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	12,396	8,409	3,987	
9 Other employee benefits	34,594	32,509	2,085	
10 Payroll taxes	24,600	21,598	3,002	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	12,000		12,000	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,322		3,322	
g Other	13,218	12,635	583	
12 Advertising and promotion	24,631	22,916	668	1,047
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	75,305	75,305		
17 Travel	18	18		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,342		1,342	
20 Interest	14,536	14,536		
21 Payments to affiliates	10,929	10,241	688	
22 Depreciation, depletion, and amortization	106,078	106,078		
23 Insurance	26,004	24,532	1,472	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a Other Supplies and Exp	74,722	74,605	117	
b Program Supplies	32,139	32,139		
c Equipment Rent & Repairs	11,370	11,370		
d Communication Expenses	9,640	9,640		
e Miscellaneous Expense	5,678	4	5,674	
f All other expenses	4,712	4,205	155	352
25 Total functional expenses. Add lines 1 through 24f	919,939	809,809	108,731	1,399
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	92,289	1	140,070
	2	Savings and temporary cash investments	744,046	2	1,501,732
	3	Pledges and grants receivable, net	284,604	3	181,839
	4	Accounts receivable, net	13,148	4	31,575
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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 instructions)		6	
	7	Notes and loans receivable, net	500,000	7	158,631
	8	Inventories for sale or use	6,183	8	5,549
	9	Prepaid expenses and deferred charges	26,741	9	13,669
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,195,878		
	b	Less: accumulated depreciation	10b 331,497	10c	7,864,381
	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)	8,975,222	16	9,897,446	
Liabilities	17	Accounts payable and accrued expenses	80,704	17	135,465
	18	Grants payable		18	
	19	Deferred revenue	30,145	19	38,799
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	508,801	25	160,067
	26	Total liabilities. Add lines 17 through 25	619,650	26	334,331
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	7,055,317	27	8,058,940
	28	Temporarily restricted net assets	217,255	28	121,175
	29	Permanently restricted net assets	1,083,000	29	1,383,000
	Organizations that do not follow SFAS 117, 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	8,355,572	33	9,563,115	
34	Total liabilities and net assets/fund balances	8,975,222	34	9,897,446	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,127,482
2	Total expenses (must equal Part IX, column (A), line 25)	2	919,939
3	Revenue less expenses. Subtract line 2 from line 1	3	1,207,543
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,355,572
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,563,115

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? Yes No

b Were the organization's financial statements audited by an independent accountant? Yes No

c 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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

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? Yes No

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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization **Camp Jorn Young Men's Christian Association, Inc.** Employer identification number **54-2184387**

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—Other
- 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?

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

h Provide the following information about the supported organization(s).

(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 support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
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 activities, etc. (see instructions)					12	
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. 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 type="checkbox"/>		
b 33 1/3% support test—2009. 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—2010. 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—2009. 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"/>		

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		7,249,754	372,695	1,608,129	1,524,558	10,755,136
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		76,819	565,534	516,292	512,226	1,670,871
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		7,326,573	938,229	2,124,421	2,036,784	12,426,007
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.)						12,426,007

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6		7,326,573	938,229	2,124,421	2,036,784	12,426,007
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		27,018	10,843	48,720	88,184	174,765
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b		27,018	10,843	48,720	88,184	174,765
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 in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)		7,353,591	949,072	2,173,141	2,124,968	12,600,772
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 2010 (line 8, column (f) divided by line 13, column (f))	15	98.61%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	99.04%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	1%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	1%

- 19a **33 1/3% support tests—2010.** 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—2009.** 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

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2010

▶ Attach to Form 990, 990-EZ, or 990-PF.

Name of the organization Camp Jern Young Men's Christian Association, Inc.	Employer identification number 54-2184387
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Organization type (check one):

- Filers of:** **Section:**
- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Camp Jorn Young Men's Christian	Employer identification number 54-2184387
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 717,132	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 300,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **Camp Jorn Young Men's Christian** Employer identification number **54-2184387**

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11		\$ 7,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12		\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization Camp Jorn Young Men's Christian	Employer identification number 54-2184387
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	\$ 5,130	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization Camp Jorn Young Men's Christian	Employer identification number 54-2184387
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Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	Pontoon Boat	\$ 11,480	09/01/10
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

Name of the organization: Camp Jorn Young Men's Christian Association, Inc. Employer identification number: 54-2184387

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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...?, 6 Did the organization inform all grantees...?

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). 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution... 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06... 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? 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)? 9 In Part XIV, 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 XIV, 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 XIV.

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 XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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 XIV.

Part V Endowment Funds. Complete if 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	1,083,000	83,000			
b Contributions	300,000	1,000,000			
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	1,383,000	1,083,000			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ %
- b Permanent endowment ▶ 100.00 %
- c Term endowment ▶ %

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)		X
3a(ii)		X
3b		

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,469,724		4,469,724
b Buildings		2,931,426	251,889	2,679,537
c Leasehold improvements				
d Equipment		337,955	71,891	266,064
e Other		456,773	7,717	449,056
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				7,864,381

Part VII Investments—Other Securities. 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)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2) Loans Due Restricted Funds	136,978	
(3) Equipment Loan	23,089	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	160,067	

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

24-37

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2010

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

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization **Camp Jorn Young Men's Christian Association, Inc.** Employer identification number **54-2184387**

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

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.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization **Camp Jorn Young Men's Christian
Association, Inc.**

Employer identification number
54-2184387

Form 990, Part III, Line 4d - All Other Achievements

Facility Rental

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Robert Eshoo

Andrew Stoll

Director

Director

Cousins

Claudia Hoogasian

Amy Hoogasian

Director

Past Dir.

Mother

Larry Kilpatrick

Richard Ribando

Director

Director

Son-in-Law

Jason Ribando

Richard Ribando

Director

Director

Son

Ron Sanderlin

Cheryl Sanderlin

Director

Director

Husband

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents

Name of the organization

Camp Jorn Young Men's Christian

Employer identification number

54-2184387

Changes to the mission statement.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
990 is presented to and reviewed by all Board members.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Monitoring at WI site and through Board involvement

Form 990, Part VI, Line 15a - Compensation Process for Top Official
Executive Director's salary is determined based upon performance review by
Board. Comparative data is reviewed but organization is not able to
compensate at that level.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
The Audit Report and 990 are available on the organization's website. The
remaining documents are available by request only.

Form **4562**
 Department of the Treasury
 Internal Revenue Service

Depreciation and Amortization
 (Including Information on Listed Property)

OMB No. 1545-0172

2010
 Attachment
 Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **Camp Jorn Young Men's Christian Association, Inc.** Identifying number **54-2184387**

Business or activity to which this form relates
Indirect Depreciation

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 (see instructions)	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 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	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 2011. 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.) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	106,078

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 2010	17	0
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 <input type="checkbox"/>		

Section B—Assets Placed in Service During 2010 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						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2010 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. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	106,078
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	

For Paperwork Reduction Act Notice, see separate instructions.

54-2184387

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
1	Land	9/01/07	4,469,724			4,469,724	0 -- Land	0	0
5	Reconstruction 02 +\$-6 adj to prior dep	8/30/07	2,809			2,809	24 MO S/L	285	117
6	Split Rail Fence on Bluff 02	8/31/07	274			274	15 MO S/L	46	18
7	CJ Sign on Bluff 02	8/30/07	518			518	5 MO S/L	259	103
8	Resurface Blacktop 90	8/30/07	1,408			1,408	8 MO S/L	440	176
9	Dining Hall Purchase	8/30/07	323,352			323,352	45 MO S/L	17,964	7,186
10	Dining Hall Contributed	8/30/07	539,444			539,444	45 MO S/L	29,969	11,988
11	Program Center purchase	8/30/07	222,060			222,060	50 MO S/L	11,103	4,441
12	Program Center Contributed	8/30/07	370,460			370,460	50 MO S/L	18,523	7,409
13	Longhouse Purchased	8/31/07	154,598			154,598	50 MO S/L	7,730	3,092
14	Longhouse Contributed	8/30/07	257,914			257,914	50 MO S/L	12,896	5,158
15	Kickapoo Winabago Purchase	8/30/07	42,502			42,502	50 MO S/L	2,125	850
16	Kickapoo Winabado Contributed	8/30/07	70,906			70,906	50 MO S/L	3,545	1,418
17	Chippewa Mohician Purchase	8/30/07	33,416			33,416	45 MO S/L	1,856	743
18	Chippewa Mohician contribution	8/30/07	55,747			55,747	45 MO S/L	3,097	1,239
19	Cherokee Arapahoe Purchase	8/30/07	11,365			11,365	25 MO S/L	1,137	454
20	Cherokee Arapahoe contributed	8/30/07	18,960			18,960	25 MO S/L	1,896	758
21	Nash Lodge Purchase	8/30/07	53,909			53,909	20 MO S/L	6,739	2,695
22	Nash lodge Contributed	8/30/07	89,935			89,935	20 MO S/L	11,242	4,497
23	Comanche Purchase	8/30/07	8,004			8,004	25 MO S/L	800	321
24	Comanche Contributed	8/30/07	13,353			13,353	25 MO S/L	1,335	534
25	Hibbard Hall Purchased	8/30/07	9,126			9,126	15 MO S/L	1,521	608
26	Hibbard Hall Contributed	8/30/07	15,225			15,225	15 MO S/L	2,538	1,015
27	Apache Cabin Purchase	8/30/07	5,041			5,041	15 MO S/L	840	336
28	Apache Cabin contributed	8/30/07	8,410			8,410	15 MO S/L	1,402	560
29	Sioux Cabin Purchase	8/30/07	5,867			5,867	15 MO S/L	978	391
30	Sioux Cabin Contributed	8/30/07	9,788			9,788	15 MO S/L	1,631	653
31	Iroquois Cabin Purchase	8/30/07	5,867			5,867	15 MO S/L	978	391
32	Iroquois Cabin Contributed	8/30/07	9,787			9,787	15 MO S/L	1,631	653
33	Trading Post purchase	8/30/07	6,693			6,693	15 MO S/L	1,116	446
34	Trading Post Contributed	8/30/07	11,165			11,165	15 MO S/L	1,861	744
35	Trips Cabin Purchase	8/30/07	2,282			2,282	15 MO S/L	380	152
36	Trips Cabin Contributed	8/30/07	3,806			3,806	15 MO S/L	634	254
37	Staff Lounge Purchase	8/30/07	5,975			5,975	15 MO S/L	996	398
38	Staff Lounge contributed	8/30/07	9,969			9,969	15 MO S/L	1,662	664
39	Furst Sailing Center Purchase	8/30/07	1,565			1,565	15 MO S/L	261	104
40	Furst Sailing Center Contributed	8/30/07	2,610			2,610	15 MO S/L	435	174
41	Doll House Purchase	8/30/07	1,043			1,043	15 MO S/L	174	69
42	Doll House Contributed	8/30/07	1,740			1,740	15 MO S/L	290	116
43	Runyan Hanger Purchase	8/30/07	14,497			14,497	15 MO S/L	2,416	967
44	Runyan Hanger Contributed	8/30/07	24,185			24,185	15 MO S/L	4,031	1,612
45	Horse Stables Purchase	8/30/07	2,249			2,249	20 MO S/L	281	113
46	Horse Stables Contributed	8/30/07	3,753			3,753	20 MO S/L	469	188
47	KYBO Bldg Purchased	8/30/07	41,294			41,294	25 MO S/L	4,129	1,652
48	KYBO Contributed	8/30/07	68,890			68,890	25 MO S/L	6,889	2,756
49	Rec Square Playground Purchased	8/30/07	2,321			2,321	15 MO S/L	387	155
50	Rec Square Playground Contributed	8/30/07	3,872			3,872	15 MO S/L	645	258
51	Motor Boat Docks Purchase	8/30/07	3,094			3,094	15 MO S/L	516	206
52	Motor Boat Docks Contributed	8/30/07	5,162			5,162	15 MO S/L	860	344
53	Swim Docks Purchased	8/30/07	6,189			6,189	10 MO S/L	1,547	619
54	Swim Docks Contributed	8/30/07	10,324			10,324	10 MO S/L	2,581	1,032
55	Canon copier (Lake county office)	8/30/07	2,194			2,194	5 MO S/L	946	378
56	Phone System	8/30/07	1,871			1,871	7 MO S/L	600	240
57	Under ground elec service 2001	8/30/07	3,708			3,708	42 MO S/L	218	87
58	Bed Frames (Ecological)	8/30/07	1,833			1,833	8 MO S/L	559	224
59	2002 Chev 15 paasenger Van	8/30/07	10,512			10,512	2 MO S/L	8,512	0
60	2005 Chev 15 passenger Van	8/30/07	18,485			18,485	5 MO S/L	7,993	3,197
62	2000 Correct Craft CTC00229K90C	8/30/07	23,620			23,620	8 MO S/L	3,871	1,548
63	Tables, Chairs, Music Eq	8/30/07	500			500	5 MO S/L	250	100
64	Cabinets and Shelving (Zenner)	8/30/07	333			333	10 MO S/L	83	34
65	Playground Fencing	8/30/07	5,116			5,116	45 MO S/L	284	114
66	Dishwasher	8/30/07	8,754			8,754	8 MO S/L	2,736	1,094
67	Commerical mixer	8/30/07	1,584			1,584	9 MO S/L	440	176
68	Dryer	8/30/07	187			187	4 MO S/L	99	40
69	Tables,	8/30/07	650			650	8 MO S/L	191	77
70	Salad Bar & End Table	8/30/07	1,058			1,058	9 MO S/L	278	112
71	Area Fencing	8/30/07	378			378	5 MO S/L	189	76
72	Bunk Beds	8/30/07	2,955			2,955	14 MO S/L	528	211

54-2184387

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
73	2 Microwave Ovens	8/30/07	139		139	5 MO S/L	70	27
74	2 Small Refrigerators	8/30/07	134		134	5 MO S/L	67	27
75	8 Bunk Beds	8/30/07	3,864		3,864	14 MO S/L	690	276
76	16 Mattresses	8/30/07	90		90	4 MO S/L	56	23
77	16 Amoire	8/30/07	4,514		4,514	14 MO S/L	806	322
78	Carpeting	8/30/07	1,389		1,389	4 MO S/L	868	348
79	Pots and Pans	8/30/07	95		95	4 MO S/L	59	24
80	Refrigerator	8/30/07	209		209	4 MO S/L	131	52
81	Electric Stove	8/30/07	181		181	4 MO S/L	113	45
82	Washer & Dryer	8/30/07	524		524	4 MO S/L	328	131
83	Kitchens Cabinets & Counters	8/30/07	2,758		2,758	24 MO S/L	287	115
84	Entry Way Benches	8/30/07	194		194	14 MO S/L	35	13
85	Equipment	8/30/07	1,668		1,668	10 MO S/L	417	167
86	Playground Equip	8/30/07	8,235		8,235	32 MO S/L	643	258
87	Tubual Slide	8/30/07	4,879		4,879	14 MO S/L	841	337
88	Floating Swin Docks	8/30/07	1,882		1,882	2 MO S/L	1,882	0
89	Pontoon Boat	8/30/07	87		87	0 MO S/L	87	0
90	Platform Tent w/ Rain Flies 93	8/30/07	101		101	1 MO S/L	101	0
Sold/Scrapped: 11/30/10								
91	Boat	8/30/07	127		127	2 MO S/L	127	0
92	8 Kayaks	8/30/07	925		925	5 MO S/L	463	185
93	Platform Tent 97	8/30/07	721		721	5 MO S/L	361	108
Sold/Scrapped: 11/30/10								
94	Speed Boat & Shoreline Station	8/30/07	925		925	2 MO S/L	925	0
95	2 Malibu Kayaks	8/30/07	258		258	4 MO S/L	135	53
96	3 Eureka Trip Tents	8/30/07	326		326	5 MO S/L	163	65
97	Fur Trader Canoe	8/30/07	2,557		2,557	8 MO S/L	799	320
98	Sunfish Sailboat	8/30/07	1,768		1,768	8 MO S/L	553	221
99	First Aid Manikins	8/30/07	301		301	8 MO S/L	94	38
100	2 Rebuilt Computers	8/30/07	289		289	2 MO S/L	289	0
Sold/Scrapped: 11/30/10								
101	Sunfish Sailboat (Camp Nicolet)	8/30/07	570		570	4 MO S/L	317	126
102	Sailboat 07	8/30/07	295		295	4 MO S/L	164	65
103	Pier Pleasure Boat Lift (Gering)	8/30/07	975		975	9 MO S/L	257	102
104	Sunfish Sailboat	8/30/07	975		975	9 MO S/L	257	102
105	Firing Stand	8/30/07	1,251		1,251	7 MO S/L	401	161
106	Step Coverings (Material)	10/07/07	885		885	50 MO S/L	43	18
107	3 HP Computers & Screens	1/18/08	1,955		1,955	5 MO S/L	814	391
109	16 Bulk Bed Parts(no head boards) (ecologi	1/25/08	1,723		1,723	15 MO S/L	239	115
111	2 Large Picnic tables (Gering)	6/25/08	2,298		2,298	10 MO S/L	383	230
112	Computer CDW (Uline)	7/18/08	898		898	5 MO S/L	284	180
113	Sunfish Sailboat (Matthews Employment)	7/31/08	3,550		3,550	10 MO S/L	562	355
114	Chef Mate 12" Slicer	7/31/08	1,030		1,030	10 MO S/L	163	103
115	Canon Super G3 Fax 11859	1/15/09	300		300	5 MO S/L	70	60
116	Storage & compartment Cabinet Oak	1/13/09	380		380	10 MO S/L	44	38
117	2 Tables 30X 48	1/13/09	390		390	10 MO S/L	46	39
118	Carpeting Loft (Mat & Install)	6/01/08	1,000		1,000	6 MO S/L	292	166
119	Carpeting (L Bohn)	6/04/08	485		485	6 MO S/L	141	81
120	Swim dock Bluff (Uihlein)	6/30/09	25,235		25,235	30 MO S/L	561	841
121	2 Large 8 sided Picnic Tables (rigoni & Top	8/30/08	2,400		2,400	10 MO S/L	360	240
122	Road Widening Clearing & Gravel (Uihlein)	7/24/08	8,500		8,500	50 MO S/L	269	170
123	Rebuild Porch from Storm	10/31/08	10,402		10,402	40 MO S/L	347	260
124	So side Window replacement	10/31/08	1,365		1,365	25 MO S/L	73	54
125	Roof & Ceiling work	11/30/08	1,152		1,152	25 MO S/L	58	46
126	Canoe Docks Rebuilt - Contributed	5/31/08	1,002		1,002	20 MO S/L	88	50
127	2 Drawer File	6/19/09	161		161	10 MO S/L	11	16
128	2- 8 Sided Picnic Tables (Rigoni&Topcik)	5/18/09	2,400		2,400	10 MO S/L	180	240
131	2-6 Tier Small Lockers (Uline)	6/30/09	1,224		1,224	10 MO S/L	82	122
132	4 Stoke Motor	7/20/09	1,500		1,500	8 MO S/L	109	188
133	Wire Shelving -Kitchen (Uline)	8/05/09	1,879		1,879	10 MO S/L	110	188
134	Kubota Tractor (Uihlein)	6/30/09	37,458		37,458	25 MO S/L	999	1,498
135	Snow Blower for Kubota (Uihlein)	9/15/09	4,579		4,579	8 MO S/L	286	573
136	John Deer X500 M-T W48 (Uihlein)	6/30/09	6,037		6,037	10 MO S/L	402	604
137	Bedroom furniture (Uihlein)	6/30/09	10,074		10,074	15 MO S/L	448	671
138	Kitchenette Sink (Uihlein)	6/30/09	200		200	20 MO S/L	7	10
139	Kitchen Cabinets w wall (Uihlein)	6/30/09	1,510		1,510	20 MO S/L	50	76
140	Swin dock Bluff (Uihlein)	6/30/09	20,925		20,925	30 MO S/L	465	698
141	Gravel Base (Zenner)	6/22/09	5,000		5,000	50 MO S/L	67	100
142	Entry Pillars rebuilt & Relocated (Uihlein)	6/30/09	9,950		9,950	50 MO S/L	133	199
143	Carpeting w/padding (Uihlein)	6/22/09	4,881		4,881	10 MO S/L	325	489
144	Gravel base 90 yds(Uihlein)	8/24/09	2,085		2,085	50 MO S/L	21	42

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Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
145	50% Topographic Survey (Uihlein)	1/08/10	1,600			1,600	50 -- Memo	0	0
146	Extensive Remodleing FY 2010 (Uihlein)	6/30/10	179,468			179,468	50 MO S/L	0	2,393
147	2/3 section Media Cabinet (Uihlein)	6/30/10	2,398			2,398	10 MO S/L	0	160
148	Kitcheneett Cabinets (Uihlein)	8/24/09	790			790	15 MO S/L	26	53
149	Entry -Top soil & Seeding (Uihlein)	8/24/09	980			980	25 MO S/L	20	39
150	Replace gravel w/pavers (Uihlein)	9/30/09	2,990			2,990	30 MO S/L	42	99
151	2 Storage Cabinets (Uihlein)	12/31/09	411			411	10 MO S/L	7	41
152	1 Storage cabinet (Uihlein)	1/26/10	170			170	10 MO S/L	1	17
153	6 Folding Tables30x96 (Uihlein)	1/18/10	1,088			1,088	10 MO S/L	9	109
154	Kitchen Wire Sheving (Uihlein)	2/28/10	228			228	10 MO S/L	0	23
155	2010 Ford F150 PU White	5/04/10	25,453			25,453	8 MO S/L	0	2,391
156	Horse Pasture Fence	6/15/10	1,855			1,855	15 MO S/L	0	93
157	Pre School Sand Box	5/12/10	761			761	10 MO S/L	0	63
158	Used HP Pavillion a43161 & poer Supply	5/05/10	553			553	5 MO S/L	0	92
159	Computer Child Care Dir	6/01/10	403			403	5 MO S/L	0	60
160	Laptop -Camp Director	6/13/10	728			728	5 MO S/L	0	109
161	4 WC Southfork Canoe's	5/17/10	2,517			2,517	10 MO S/L	0	189
162	1 WC Southfork Canoe	6/09/10	629			629	10 MO S/L	0	47
163	Carpet 12x 18 (ClarkCarpet)	5/31/10	486			486	10 MO S/L	0	36
164	Microwave Oven	6/17/10	169			169	8 MO S/L	0	14
165	21 CU FT Refrigerator	7/02/10	739			739	10 MO S/L	0	49
166	Table Benches (Gary Gramley)	7/14/10	2,750			2,750	10 MO S/L	0	183
167	Water Well	7/26/10	2,470			2,470	20 MO S/L	0	72
168	1994 Evinrude 30HP outboard	7/29/10	1,500			1,500	10 MO S/L	0	88
169	Suzuki 115 HP 4 St Engine 115TLK2 (Ulin)	9/01/10	3,890			3,890	10 MO S/L	0	195
170	2002 San P:an 22' Pontoon Boat (Uiline)	9/01/10	7,590			7,590	10 MO S/L	0	380
171	2002 Gas Yamah Golf Cart (Uiline)	10/08/10	2,000			2,000	5 MO S/L	0	167
172	Air Freshner Machine	1/11/11	749			749	5 MO S/L	0	25
173	Window Treatments (Uihlein)	1/01/11	7,171			7,171	15 MO S/L	0	80
174	Bathroom floors (Uihlein)	12/16/10	4,887			4,887	30 MO S/L	0	27
175	Window Blinds (Uihlein)	12/20/10	8,534			8,534	15 MO S/L	0	95
176	Shower Doors (Uihlein)	1/05/11	2,532			2,532	20 MO S/L	0	21
177	Remodeling (Uihlein)	2/28/11	15,893			15,893	0 -- Memo	0	0
178	Remodeling (Uihlein)	2/28/11	19,084			19,084	0 -- Memo	0	0
179	Remodeling (Uihlein)	2/28/11	18,255			18,255	0 -- Memo	0	0
180	Fire Pit and Benches (Uihlein)	10/08/10	3,240			3,240	20 MO S/L	0	68
181	Bluff Stone Stairs (Uihlein)	11/01/10	81,172			81,172	50 MO S/L	0	541
182	Porch Windows (Uihlein)	2/28/11	42,963			42,963	0 -- Memo	0	0
183	Extensive remodeling	6/30/10	146,161			146,161	50 MO S/L	0	1,949
184	Gravel Road Dining Hall & Lodge (Uihlein)	7/01/10	3,860			3,860	30 MO S/L	0	86
185	Landscaping- walkways etc	7/01/10	83,198			83,198	30 MO S/L	0	1,849
186	Cement Foundation (Uihlein)	11/30/10	6,275			6,275	50 MO S/L	0	31
187	5 New Tents (Uihlein)	2/28/11	12,676			12,676	10 -- Memo	0	0
188	100 Matress's	2/28/11	8,297			8,297	10 -- Memo	0	0
189	Mikowave MT40785pb (Uihlein)	6/26/10	150			150	5 MO S/L	0	20
190	Sink Main Floor	6/25/10	276			276	10 MO S/L	0	18
191	Regrade and gravel for pitch Dinning Hall /	11/15/10	3,200			3,200	50 MO S/L	0	21
192	Gravel & Grade Road to Stables	11/15/10	1,800			1,800	50 MO S/L	0	12
193	Main Road Architectual ser	12/10/10	1,016			1,016	0 -- Memo	0	0
194	Window Treatments (Uihlein)	6/15/10	11,441			11,441	15 MO S/L	0	572
195	Log Furniture (Uihlein)	11/01/10	1,409			1,409	10 MO S/L	0	47
196	3 Amoire's w 2 drawers (uihleln)	6/15/10	1,800			1,800	10 MO S/L	0	135
197	4 Dinning Room Chairs (Uihlein)	6/15/10	1,260			1,260	10 MO S/L	0	95
198	Kitchen Aid 25 cuft Refrigerator	6/15/10	2,499			2,499	10 MO S/L	0	187
199	Kitchen Aid Dishwasher (Uihleeln)	6/15/10	738			738	10 MO S/L	0	55
200	Micowave (Uihlein)	6/15/10	149			149	105 MO S/L	0	1
201	2 Love Seats -color coffee PB(Uihlein)	6/30/10	555			555	10 MO S/L	0	37
202	1 Love Seat color espresso PB (Uehlein)	6/30/10	404			404	10 MO S/L	0	27
203	Coat Rack	6/30/10	199			199	10 MO S/L	0	13
204	Wall to wall Carpet/ Tirz (Uihlein)	6/30/10	4,309			4,309	10 MO S/L	0	287
205	Table Tennis Table	6/30/10	959			959	10 MO S/L	0	64
206	3 Dinnerware Sets (Uihlelnr)	6/30/10	787			787	10 MO S/L	0	52
207	Bean Bags - Pottery Barn(Uihlein)	6/24/10	369			369	10 MO S/L	0	25
208	2 Bedside Tables Pottery Barn (Uihlein)	6/19/10	403			403	10 MO S/L	0	27
209	2 Love Seats Pottery Barn (Uihlein)	6/19/10	1,320			1,320	10 MO S/L	0	88
210	4 Cushy Storage Bases Pottery Barn (Uihlei)	6/19/10	821			821	10 MO S/L	0	55
211	5 Verticle Mirrors 28x39 (Uihlein)	6/25/10	759			759	10 MO S/L	0	51
212	6 Arm Chairs Wood Frame (Uihelin)	6/25/10	938			938	10 MO S/L	0	63
213	2 Pillows	6/26/10	150			150	10 MO S/L	0	10
214	Large Spindle Bookcase (Uihlein)	6/26/10	595			595	10 MO S/L	0	40
215	Medium Spindle Bookcase (Uihein)	6/26/10	550			550	10 MO S/L	0	37

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Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
216	Side board wback sack (Uihlein)	6/26/10	1,323			1,323	10 MO S/L	0	88
217	End Table 22" round (Uihlein)	6/26/10	575			575	10 MO S/L	0	38
218	Round Table w shelf (Uihlein)	6/26/10	333			333	10 MO S/L	0	22
219	Fire place Utensil Stand	10/30/10	375			375	10 MO S/L	0	13
220	Capitains Chair	9/03/10	585			585	10 MO S/L	0	29
221	5 Mattresses (Uihlein)	9/17/10	1,350			1,350	10 MO S/L	0	56
222	6 Game Table Chairs Spindle Backs (Uihlei	2/28/11	4,810			4,810	0 -- Memo	0	0
223	1 Oval Table Cherry (Uihlein)	2/28/11	1,940			1,940	0 -- Memo	0	0
224	Cornoir Cabinet Cherry (Uihlein)	2/28/11	2,020			2,020	0 -- Memo	0	0
225	4 Storage Cabinets 26x24x72 Basement (Ui	3/02/10	756			756	10 MO S/L	0	76
226	Wire Sheving Basement (Uihlein)	3/22/10	141			141	10 MO S/L	0	13
227	60 Padded folding Chairs (Uihelion)	4/08/10	1,008			1,008	10 MO S/L	0	92
228	Storage Cabinet 36x24x78	4/08/10	190			190	10 MO S/L	0	17
229	Storage Cabinet 48x24x78	4/08/10	139			139	10 MO S/L	0	13
230	2 Doubled sided Grind Bike Racks (Uihlein	6/29/10	490			490	10 MO S/L	0	33
231	6 30x96 Folding Tables Tan(Uihlein)	7/14/10	682			682	10 MO S/L	0	45
232	Kitchen Aid Dish Washer	9/28/10	649			649	10 MO S/L	0	27
233	5 Bunk Beds (Uihlein)	11/01/10	1,942			1,942	0 -- Memo	0	0
234	5 Bulk Beds (Uihlein)	11/01/10	1,942			1,942	0 -- Memo	0	0
235	5 Bulk Beds (Uihlein)	11/01/10	1,942			1,942	0 -- Memo	0	0
236	5 Bulk Beds (Uihlein)	11/01/10	1,942			1,942	0 -- Memo	0	0
237	Horizontal Mirror	11/01/10	113			113	0 -- Memo	0	0
238	Horizontal Mirror	11/01/10	113			113	0 -- Memo	0	0
239	Horizontal Mirror	11/01/10	113			113	0 -- Memo	0	0
240	Horizontal Mirror	11/01/10	113			113	0 -- Memo	0	0
241	1 Four Drawer Chests (Uihlein)	11/01/10	520			520	0 -- Memo	0	0
242	1 Four Drawer Chests (Uihlein)	11/01/10	520			520	0 -- Memo	0	0
243	1 Four Dawer Chests (Uihlein)	11/01/10	520			520	0 -- Memo	0	0
244	1 Four Dawer Chests (Uihlein)	11/01/10	520			520	0 -- Memo	0	0
245	Six Drawer Double Dresser (Uihlein)	11/01/10	455			455	0 -- Memo	0	0
246	Six Drawer Double Dresser (Uihlein)	11/01/10	455			455	0 -- Memo	0	0
247	50% deposit Buck Beds Ecologic (Uihlein)	11/01/10	6,118			6,118	0 -- Memo	0	0
248	Mattress Covers	11/09/10	689			689	0 -- Memo	0	0
249	Mattress Covers	11/09/10	344			344	0 -- Memo	0	0
250	Mattress Covers	11/09/10	344			344	0 -- Memo	0	0
251	3 Yurts on platforms	2/28/11	37,741			37,741	25 -- Memo	0	0
252	New Underground Elec Service	10/15/10	2,796			2,796	50 MO S/L	0	23
253	Six Drawer Ddouble Dresser (Uihlein)	11/01/10	455			455	0 -- Memo	0	0
254	Hanging Chair Caddie	6/23/10	366			366	10 MO S/L	0	24
255	Bathroom Mirrors	1/11/11	840			840	10 MO S/L	0	14
256	2 Larkin Togged Rugs 8x10 & 5x8	2/15/11	883			883	10 MO S/L	0	7
257	Bulk Beds	2/28/11	5,428			5,428	10 -- Memo	0	0
258	24 Mattresses	2/28/11	2,186			2,186	10 -- Memo	0	0
259	Gravel Road to Village	2/28/11	9,800			9,800	50 MO S/L	0	0
260	Overhead Garage Doors	11/30/10	7,790			7,790	25 MO S/L	0	78
	Total Other Depreciation		<u>8,196,979</u>			<u>8,196,979</u>		<u>226,266</u>	<u>106,078</u>
	Total ACRS and Other Depreciation		<u>8,196,979</u>			<u>8,196,979</u>		<u>226,266</u>	<u>106,078</u>
	Grand Totals		8,196,979			8,196,979		226,266	106,078
	Less: Dispositions and Transfers		1,111			1,111		751	108
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>8,195,868</u>			<u>8,195,868</u>		<u>225,515</u>	<u>105,970</u>

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
	\$ 16,482		14			
Total	\$ 16,482					

Federal Statements

54-2184387

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Other Fees	\$ 13,218	\$ 12,635	\$ 583	\$
Total	\$ 13,218	\$ 12,635	\$ 583	\$ 0

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Postage	\$ 4,712	\$ 4,205	\$ 155	\$ 352
Total	\$ 4,712	\$ 4,205	\$ 155	\$ 352

Form **8868**
(Rev. January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization Camp Jorn Young Men's Christian Association, Inc.	Employer identification number 54-2184387
	Number, street, and room or suite no. If a P.O. box, see instructions. 28 Red Feather Road, P.O. Box 430	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Manitowish WI 54545-0430	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ Gerold Topcik
Telephone No. ▶ FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 10/15/11, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year or
 ▶ tax year beginning 03/01/10, and ending 02/28/11.

2 If this tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Paperwork Reduction Act Notice, see Instructions.
DAA