SHORT PERIOD RETURN

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)

Department of the Treasury
Internal Revenue Service

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

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 7/1/2006 , 2006, and ending 12/31/2006 , 20

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: CAMP FIRE USA

Number and street (or P.O. box if mail is not delivered to street address): 5110 N 40th Street — Room/suite: Suite 107

City or town, state or country, and ZIP + 4: Phoenix, AZ 85018

D Employer identification number: 86 0104417

E Telephone number: (602) 954-7544

F Accounting method: ☐ Cash ☑ Accrual ☐ Other (specify) ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☑ Yes ☐ No

I Group Exemption Number ▶ 1409

G Website: ▶ campfireaz.org

J Organization type (check only one) ▶ ☑ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

M Check ▶ ☐ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 1087327

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

Revenue

1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a	95,502		
b	Direct public support (not included on line 1a)	1b	43,644		
c	Indirect public support (not included on line 1a)	1c	0		
d	Government contributions (grants) (not included on line 1a)	1d	8,650		
e	**Total** (add lines 1a through 1d) (cash $ 147,796 noncash $ 0)			1e	147,796
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	859,132
3	Membership dues and assessments			3	0
4	Interest on savings and temporary cash investments			4	301
5	Dividends and interest from securities			5	3,376
6a	Gross rents	6a	39,810		
b	Less: rental expenses	6b	16,501		
c	Net rental income or (loss). Subtract line 6b from line 6a			6c	23,309
7	Other investment income (describe ▶)			7	0

		(A) Securities		(B) Other
8a	Gross amount from sales of assets other than inventory	0	8a	0
b	Less: cost or other basis and sales expenses	0	8b	0
c	Gain or (loss) (attach schedule)	0	8c	0

d	Net gain or (loss). Combine line 8c, columns (A) and (B) ▶ ☐			8d	0
9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ ☐				See Statement 1
a	Gross revenue (not including $ 43,644 of contributions reported on line 1b)	9a	36,801		
b	Less: direct expenses other than fundraising expenses	9b	36,801		
c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c	0
10a	Gross sales of inventory, less returns and allowances	10a	0		
b	Less: cost of goods sold	10b	0		
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	0
11	Other revenue (from Part VII, line 103)			11	111
12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	1,034,025

Expenses

13	Program services (from line 44, column (B))	13	908,052
14	Management and general (from line 44, column (C))	14	135,535
15	Fundraising (from line 44, column (D))	15	107,158
16	Payments to affiliates (attach schedule) See Statement 2	16	20,512
17	**Total expenses.** Add lines 16 and 44, column (A)	17	1,171,257

Net Assets

18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	-137,232
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	3,270,370
20	Other changes in net assets or fund balances (attach explanation) Stmt 3	20	-17,693
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	3,115,445

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. *(See the instructions.)*

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash $ ______ noncash $ ______) If this amount includes foreign grants, check here ▶ ☐	22a	0	0		
22b Other grants and allocations (attach schedule) (cash $ ______ noncash $ ______) If this amount includes foreign grants, check here ▶ ☐	22b	0	0		
23 Specific assistance to individuals (attach schedule)	23	0	0		
24 Benefits paid to or for members (attach schedule)	24	0	0		
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule) Stmt 4	25a	159,530	61,285	53,744	44,501
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	0	0	0	0
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c	0	0	0	0
26 Salaries and wages of employees not included on lines 25a, b, and c	26	554,925	502,045	34,528	18,352
27 Pension plan contributions not included on lines 25a, b, and c	27	5,550	5,422	128	0
28 Employee benefits not included on lines 25a – 27	28	34,126	26,277	4,604	3,245
29 Payroll taxes	29	58,301	47,070	6,510	4,721
30 Professional fundraising fees	30	0	0	0	0
31 Accounting fees	31	0	0	0	0
32 Legal fees	32	0	0	0	0
33 Supplies	33	36,060	34,976	426	658
34 Telephone	34	5,451	4,902	342	207
35 Postage and shipping	35	763	526	53	184
36 Occupancy	36	57,831	45,672	7,625	4,534
37 Equipment rental and maintenance	37	4,957	4,360	372	225
38 Printing and publications	38	3,196	1,606	1,527	63
39 Travel	39	28,583	28,035	287	261
40 Conferences, conventions, and meetings	40	2,557	1,430	1,100	27
41 Interest	41	19,910	15,023	4,072	815
42 Depreciation, depletion, etc. (attach schedule)	42	67,810	67,014	495	301 Stmt 5
43 Other expenses not covered above (itemize): a See Statement 6	43a	111,195	62,409	19,722	29,064
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)	44	1,150,745	908,052	135,535	107,158

Joint Costs. Check ▶ ☑ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ **Yes** ☑ **No**

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ______; **(ii)** the amount allocated to Program services $ ______; **(iii)** the amount allocated to Management and general $ ______; and **(iv)** the amount allocated to Fundraising $

Part III **Statement of Program Service Accomplishments** *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ To provide the Camp Fire program through the Cou All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a See Statement 7 (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
b (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
c (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
d (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
e Other program services (attach schedule) (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services). . . . . ▶	908,052

Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets					
45 Cash—non-interest-bearing			11,712	45	43,460
46 Savings and temporary cash investments			63,340	46	384,108
47a Accounts receivable	47a	83,828			
b Less: allowance for doubtful accounts	47b	0	50,640	47c	83,828
48a Pledges receivable	48a	311,851			
b Less: allowance for doubtful accounts	48b	10,000	582,076	48c	301,851
49 Grants receivable			8,000	49	0
50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			0	50a	0
b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			0	50b	0
51a Other notes and loans receivable (attach schedule)	51a	0			
b Less: allowance for doubtful accounts	51b	0	0	51c	0
52 Inventories for sale or use			2,430	52	0
53 Prepaid expenses and deferred charges			22,528	53	11,374
54a Investments—publicly-traded securities ▶ ☐ Cost ☐ FMV			0	54a	0
b Investments—other securities (attach schedule) ▶ ☐ Cost ☑ FMV			312,135	54b	296,998 Stmt 8
55a Investments—land, buildings, and equipment: basis	55a	3,245,680			
b Less: accumulated depreciation (attach schedule) See Statement 9	55b	703,794	0	55c	2,541,886
56 Investments—other (attach schedule)			0	56	0
57a Land, buildings, and equipment: basis	57a	0			
b Less: accumulated depreciation (attach schedule)	57b	0	2,585,115	57c	0
58 Other assets, including program-related investments (describe ▶ See Statement 10)			12,761	58	12,761
59 **Total assets** (must equal line 74). Add lines 45 through 58			3,650,737	59	3,676,266
Liabilities					
60 Accounts payable and accrued expenses			72,442	60	96,403
61 Grants payable			66,425	61	0
62 Deferred revenue			0	62	40,030
63 Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
64a Tax-exempt bond liabilities (attach schedule)			0	64a	0
b Mortgages and other notes payable (attach schedule)			0	64b	0
65 Other liabilities (describe ▶ See Statement 11)			241,500	65	424,388
66 **Total liabilities.** Add lines 60 through 65			380,367	66	560,821
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 67 through 69 and lines 73 and 74.					
67 Unrestricted			2,595,644	67	2,697,415
68 Temporarily restricted			674,726	68	418,030
69 Permanently restricted			0	69	0
Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
70 Capital stock, trust principal, or current funds				70	
71 Paid-in or capital surplus, or land, building, and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 **Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)			3,270,370	73	3,115,445
74 **Total liabilities and net assets/fund balances.** Add lines 66 and 73			3,650,737	74	3,676,266

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	
b	Amounts included on line **a** but not on Part I, line 12:				
1	Net unrealized gains on investments	b1			
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	
c	Subtract line **b** from line **a**			c	
d	Amounts included on Part I, line 12, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines **d1** and **d2**			d	
e	**Total revenue** (Part I, line 12). Add lines **c** and **d** ▶			e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	
b	Amounts included on line **a** but not on Part I, line 17:				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	
c	Subtract line **b** from line **a**			c	
d	Amounts included on Part I, line 17, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines **d1** and **d2**			d	
e	**Total expenses** (Part I, line 17). Add lines **c** and **d** ▶			e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(If not paid, enter -0-.)**	**(D)** Contributions to employee benefit plans & deferred compensation plans	**(E)** Expense account and other allowances
See Statement 12				

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 11			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		✔
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶ If "Yes," attach a statement that includes the information described in the instructions.	75c		✔
d	Does the organization have a written conflict of interest policy?	75d	✔	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		✔
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. **See Statement 13**	77	✔	
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		✔
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		✔
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		✔
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt **or** ☐ nonexempt			
81a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0			
b	Did the organization file **Form 1120-POL** for this year?	81b		✔

Part VI Other Information *(continued)*

			Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	✔	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) — 82b: 5,575			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✔	
b	Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?	83b	✔	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		✔
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members — 85c			
d	Section 162(e) lobbying and political expenditures — 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	*501(c)(7) orgs.* Enter: **a** Initiation fees and capital contributions included on line 12 — 86a			
b	Gross receipts, included on line 12, for public use of club facilities — 86b			
87	*501(c)(12) orgs.* Enter: **a** Gross income from members or shareholders — 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) — 87b			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		✔
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶	88b		✔
89a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		✔
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0			
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		✔
f	*All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		✔
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		✔

90a List the states with which a copy of this return is filed ▶ None

b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) — 90b: 40

91a The books are in care of ▶ The Organization Telephone no. ▶ 602-954-7544

Located at ▶ 5011 N 40th St Suite 107, Phoenix, AZ ZIP + 4 ▶ 85018

			Yes	No
b	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)?	91b		✔
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

Part VI Other Information *(continued)*

			Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶	91c		✔
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041*****—**Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92		

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	**(B)** Amount	**(C)** Exclusion code	**(D)** Amount	
93	Program service revenue:					
a	Program participant fees					112,587
b						
c						
d						
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					746,545
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments			14	301	
96	Dividends and interest from securities			14	3,376	
97	Net rental income or (loss) from real estate:					
a	debt-financed property					
b	not debt-financed property			16	23,309	
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a Miscellaneous program rev					111
b						
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))		0		26,986	859,243
105	**Total** (add line 104, columns (B), (D), and (E)) ▶					886,229

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	See Statement 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ **Yes** ☑ **No**

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **Yes** ☑ **No**

Note: *If "Yes" to* ***(b),*** *file Form 8870* ***and*** *Form 4720 (see instructions).*

Part XI **Information Regarding Transfers To and From Controlled Entities.** *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		

Please Sign Here

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.

Carolyn Novicoff — 7/9/07

Signature of officer — Date

Carolyn Novicoff, CEO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen. Inst. X)
Firm's name (or yours if self-employed), address, and ZIP + 4 ,,		EIN ▶	
		Phone no. ▶ ( )	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2006

Name of the organization: **CAMP FIRE USA**

Employer identification number: **86 0104417**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	**(b)** Title and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans & deferred compensation	**(e)** Expense account and other allowances
None				
Total number of other employees paid over $50,000 . ►	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	**(b)** Type of service	**(c)** Compensation
None		
Total number of others receiving over $50,000 for professional services . . . . ► 0		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	**(b)** Type of service	**(c)** Compensation
None		
Total number of other contractors receiving over $50,000 for other services . . . . ► 0		

Part III Statements About Activities (See page 2 of the instructions.)

		Line	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ________ (Must equal amounts on line 38, Part VI-A, or line **i** of Part VI-B.)	1		✔
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)* **See Statement 15**			
a	Sale, exchange, or leasing of property?	2a	✔	
b	Lending of money or other extension of credit?	2b		✔
c	Furnishing of goods, services, or facilities?	2c	✔	
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? **See Form 990, Pt. V**	2d	✔	
e	Transfer of any part of its income or assets?	2e		✔
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		✔
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	✔	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		✔
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		✔
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		✔
b	Did the organization make any taxable distributions under section 4966?	4b		✔
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		✔
d	Enter the total number of donor advised funds owned at the end of the tax year ▶			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶	0		
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶	0		

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ ------------------------

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ An organization that normally receives: **(1) more than 33⅓%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33⅓%** 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). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:

☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support
Total . . . . . ▶					0

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

	Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	919,214	964,729	1,837,077	1,537,567	5,258,587
16	Membership fees received	0	0	0	0	0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	381,600	270,596	355,155	359,519	1,366,870
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	16,349	24,211	11,056	19,125	70,741
19	Net income from unrelated business activities not included in line 18	0	0	0	0	0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	26,849	15,354	19,294	2,123	63,620 Stmt 16
23	Total of lines 15 through 22	1,344,012	1,274,890	2,222,582	1,918,334	6,759,818
24	Line 23 minus line 17	962,412	1,004,294	1,867,427	1,558,815	5,392,948
25	Enter 1% of line 23	13,440	12,749	22,226	19,183	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ **26a** 107,859

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b** 759,264

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ **26c** 5,392,948

d Add: Amounts from column (e) for lines: 18 70,741 19 0
22 63,620 26b 759,264 ▶ **26d** 893,625

e Public support (line 26c minus line 26d total) ▶ **26e** 4,499,323

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ **26f** 83 %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2005) ________ (2004) ________ (2003) ________ (2002) ________

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2),** enter the sum of these differences (the excess amounts) for each year:

(2005) ________ (2004) ________ (2003) ________ (2002) ________

c Add: Amounts from column (e) for lines: 15 ________ 16 ________
17 ________ 20 ________ 21 ________ ▶ **27c**

d Add: Line 27a total ________ and line 27b total ________ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e**

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ **27f**

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ **27g** %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ **27h** %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ **a** ☐ if the organization belongs to an affiliated group. Check ▶ **b** ☐ if you checked **"a"** and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for **all** electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table—	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is—	The lobbying nontaxable amount is—
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		✔	
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)		✔	
c Media advertisements		✔	
d Mailings to members, legislators, or the public		✔	
e Publications, or published or broadcast statements		✔	
f Grants to other organizations for lobbying purposes		✔	
g Direct contact with legislators, their staffs, government officials, or a legislative body		✔	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✔	
i Total lobbying expenditures (Add lines **c** through **h.**)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		✔
(ii) Other assets	a(ii)		✔
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		✔
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		✔
(iii) Rental of facilities, equipment, or other assets	b(iii)		✔
(iv) Reimbursement arrangements	b(iv)		✔
(v) Loans or loan guarantees	b(v)		✔
(vi) Performance of services or membership or fundraising solicitations	b(vi)		✔
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		✔

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ **Yes** ☑ **No**

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Statement 1
Form: 990
Page: 1
Part: I
Question: 9

CAMP FIRE USA
86-0104417

Schedule of Special Events

Description	Gross Receipts	Contributions	Gross Revenue	Direct Costs	Net Income (Loss)
Buffet Dinner	$80,445.00	$43,644.00	$36,801.00	$36,801.00	$0.00
Total:	**$80,445.00**	**$43,644.00**	**$36,801.00**	**$36,801.00**	**$0.00**

Statement 2
Form: 990
Page: 1
Part: I
Question: 16

CAMP FIRE USA
86-0104417

Payments to affiliates

Affiliate	Purpose	Amount
Camp Fire USA 1100 Walnut Street Kansas City, MO 64106 United States	Affiliation fee	$20,512.00

Statement 3
Form: 990
Page: 1
Part: I
Question: 20

CAMP FIRE USA
86-0104417

Other changes in Net Assets or Fund Balances

Explanation	Amount
Unrealized gain	$24,634.00
Prior period adjustments	-$42,327.00
Total:	**-$17,693.00**

Statement 4
Form: 990
Page: 2
Part: II
Question: 25

CAMP FIRE USA
86-0104417

Compensation Detail - Officers, Directors, Etc.

Description	Total:	Pgm Services	Mgt and General	Fundraising
Donna Greenspan				
Compensation	$24,339.00	$14,360.00	$9,249.00	$730.00
Benefits	$973.00	$574.00	$370.00	$29.00
Expenses	$0.00	$0.00	$0.00	$0.00
Total	$25,312.00	$14,934.00	$9,619.00	$759.00
James Weaver				
Compensation	$39,339.00	$0.00	$0.00	$39,339.00
Benefits	$1,450.00	$0.00	$0.00	$1,450.00
Expenses	$0.00	$0.00	$0.00	$0.00
Total	$40,789.00	$0.00	$0.00	$40,789.00
Carolyn Novicoff				
Compensation	$52,152.00	$30,248.00	$19,818.00	$2,086.00
Benefits	$2,086.00	$1,210.00	$793.00	$83.00
Expenses	$0.00	$0.00	$0.00	$0.00
Total	$54,238.00	$31,458.00	$20,611.00	$2,169.00
Daniel Costello				
Compensation	$37,684.00	$14,320.00	$22,610.00	$754.00
Benefits	$1,507.00	$573.00	$904.00	$30.00
Expenses	$0.00	$0.00	$0.00	$0.00
Total	$39,191.00	$14,893.00	$23,514.00	$784.00
Total:	**$159,530.00**	**$61,285.00**	**$53,744.00**	**$44,501.00**

Statement 5
Form: 990
Page: 2
Part: II
Question: 42

CAMP FIRE USA
86-0104417

Depreciation and Depletion

Asset	Current Deprec.
Equipment	$20,221.00
Buildings	$44,808.00
Vehicles	$2,781.00
Total	**$67,810.00**

Statement 6 **CAMP FIRE USA**
Form: 990 **86-0104417**
Page: 2
Part: II
Question: 43

Attachment listing other expenses for Part II

Description	Total:	Pgm Services	Mgt and General	Fundrasing
Other professional fees	$12,471.00	$7,306.00	$4,827.00	$338.00
Advertising	$10,371.00	$5,127.00	$1,204.00	$4,040.00
Repairs and maintenance	$2,420.00	$2,398.00	$14.00	$8.00
Non-payroll insurance	$26,707.00	$23,089.00	$2,476.00	$1,142.00
Training	$389.00	$389.00	$0.00	$0.00
Miscellaneous	$24,489.00	$12,461.00	$11,201.00	$827.00
Bad Debt Expense	$22,709.00	$0.00	$0.00	$22,709.00
Vehicle/bus leases	$11,639.00	$11,639.00	$0.00	$0.00
Total:	**$111,195.00**	**$62,409.00**	**$19,722.00**	**$29,064.00**

Statement 7 **CAMP FIRE USA**
Form: 990 **86-0104417**
Page: 3
Part: III
Question:

Program Services

Achievement	**Pgm. Svc. Exp.**
Scouting Programs: Resident Camp - A supervised 6 week camp with outdoor activities such as hiking, horseback riding, nature study, and crafts. Emphasizes self, social, and outdoor skill development. (390 Campers) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$197,244.00
Youth Development Programs, General/Other: Teens In Action - Serves as a conflict resolution and community service model for teens. Teens serve their communities with action projects that address human service needs. (50 Participants) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$6,416.00
Youth Development Programs, General/Other: Outdoor Skills - Program that develops appreciation for the environment and community service. (200 Participants) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$28,379.00
Children & Youth Services, General/Other: Kids Kamps - Provide a summer alternative to day care. (250 Participants) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$38,182.00
Children & Youth Services, General/Other: After School - Recreational and educational opportunities for students in after school settings. (500 Students) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$170,388.00
Elementary & Secondary Education, General/Other: Tutoring - Tutoring services to prepare students to succeed in taking the AIMS test. (1000 Students) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$413,377.00
Youth Development Programs, General/Other: Clubs - Small group mentoring program (175 Participants) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$49,386.00
Youth Development Programs, General/Other: Self -Reliance - Providing prevention education to students. (900 Students) **Grants and Allocations: $0.00 This amount includes foreign grants: N/A**	$4,680.00
Total:	**$908,052.00**

Statement 8 **CAMP FIRE USA**
Form: 990 **86-0104417**
Page: 4
Part: IV
Question: 54

Investments - Securities

Security	Valuation Type	Amount
Bond Mutual Fund	FMV	$59,820.00
Government Bond Mutual Fund	FMV	$31,984.00
Miscellaneous Equity Mutual Funds	FMV	$205,194.00
Total:		**$296,998.00**

Statement 9 | **CAMP FIRE USA**
Form: 990 | **86-0104417**
Page: 4
Part: IV
Question: 55

Schedule of Investment Land, Buildings and Equipment

Description	Cost	Depreciation	Book Value
Equipment	$425,657.00	$193,221.00	$232,436.00
Vehicles	$70,130.00	$46,487.00	$23,643.00
Buildings	$2,749,893.00	$464,086.00	$2,285,807.00
Total:	**$3,245,680.00**	**$703,794.00**	**$2,541,886.00**

Statement 10
Form: 990
Page: 4
Part: IV
Question: 58

CAMP FIRE USA
86-0104417

Other Assets

Asset Description	BOY Amount	EOY Amount
Deposits and Crypt	$12,761.00	$12,761.00
Total:	**$12,761.00**	**$12,761.00**

Statement 11
Form: 990
Page: 4
Part: IV
Question: 65

CAMP FIRE USA
86-0104417

Other Liabilities

Liability Description	BOY Amount	EOY Amount
Line of Credit	$241,500.00	$424,388.00
Total:	**$241,500.00**	**$424,388.00**

Statement 12
Form: 990
Page: 5
Part: V
Question:

CAMP FIRE USA
86-0104417

Officers, Directors, Trustees, and Key Employees

Name and Address	Hrs	Comp.	Benefits	Expenses
Ginny Foltz Title: Treasurer Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	2	$0.00	$0.00	$0.00
Bill Arthur Title: Chairman Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	4	$0.00	$0.00	$0.00
Philip Noplos Title: Vice President Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	2	$0.00	$0.00	$0.00
Kim Erickson Title: Vice President Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	2	$0.00	$0.00	$0.00
Dyan Haugen Title: Director Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	0.5	$0.00	$0.00	$0.00
Carolyn Novicoff Title: Exec Director/CEO Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	45	$52,152.00	$2,086.00	$0.00

Name and Address	Hrs	Comp.	Benefits	Expenses
Daniel Costello Title: CFO Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	40	$37,683.00	$1,507.00	$0.00
Donna Greenspan Title: COO Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	40	$24,339.00	$974.00	$0.00
James Weaver Title: Development Director Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	40	$39,339.00	$1,574.00	$0.00
Gina Ramos Montes Title: Secretary Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	3	$0.00	$0.00	$0.00
Kim Hochschuler Title: Director Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	0.5	$0.00	$0.00	$0.00
Carole Rayes Title: Director Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	0.5	$0.00	$0.00	$0.00
Scott Shipley Title: Director Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018	0.5	$0.00	$0.00	$0.00

Name and Address	Hrs	Comp.	Benefits	Expenses
Country: United States				
Pamela Weir Title: Youth Representative Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	0.5	$0.00	$0.00	$0.00
Suzanne Gittus Title: Director Addr 1: 5110 N 40th Street Addr 2: CSZ: Phoenix, AZ 85018 Country: United States	0.5	$0.00	$0.00	$0.00
TOTALS		**$153,513.00**	**$6,141.00**	**$0.00**

Amendment to Change Fiscal Year

JTW-January 17, 2007

Authority to Change By-Laws is addressed in Article V as follows:

ARTICLE V
GOVERNANCE BY BOARD OF DIRECTORS

Section 1. Powers of the Board

1. Subject to the limitation of these By-Laws, the Articles of Organization and the laws of the State of Arizona, a sitting Board of Directors shall oversee the business and affairs of the Council.

2. Pursuant to Article IV, Section 1 of these By-Laws, the Board of Directors of the Council may, from time to time, bestow various non-voting membership categories to both youths and adults.

3. Current members of the Board of Directors shall be entitled to vote at any Council meeting including, but not necessarily limited to such matters as: election and re-election of Board members, changes in Articles of Incorporation, **changes or additions to these By-Laws**, sale of corporate assets, authorization to borrow, invest, and deposit funds, mergers or acquisitions, or final dissolution of the Council or other matters addressed in these By-Laws.

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Article to be changed:

ARTICLE XII
FISCAL YEAR

The fiscal year of the Council shall be from July 1 to June 30.

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Resolution to be voted on:

As authorized in Article V, Section 1, Paragraph 3, be it resolved by the Board of Directors of The Camp Fire Council of Greater Arizona that ARTICLE XII – FISCAL YEAR be amended to read as follows:
The fiscal year of the Council shall be from January 1 to December 31.

Voted on and passed this 23 day of January, 2007.

Regin M. Martin
Secretary

Statement 14 **CAMP FIRE USA**
Form: 990 **86-0104417**
Page: 8
Part: VIII
Question:

Relationship of Activities

Line No	Relationship of Activities to the Accomplishment of Exempt Purposes
103 a	Miscellaneous revenue generated by program activities in support of the mission of the organization.
93 g	Fees for tutoring in furtherance of the exempt purpose of the organization.
93 a	Fees and related revenue for the operation of the programs of the organization in support of its exempt purpose.

Statement 15 **CAMP FIRE USA**
Form: Schedule A **86-0104417**
Page: 2
Part: III
Question: 2

Transaction Explanations

Line	**Expanation**
2c	Certain officers, directors, key employees, and their families purchased tickets to fund raising events, made contributions to the organzation, and/or provided insignificant goods and/or services to the organization through the year.
2a	Certain officers, directors, key employees, and their families purchased tickets to fund raising events, made contributions to the organzation, and/or provided insignificant goods and/or services to the organization through the year.

Statement 16
Form: Schedule A
Page: 3
Part: IV-A
Question: 22

CAMP FIRE USA
86-0104417

Other Income

Description	**2005**	**2004**	**2003**	**2002**
Miscellaneous	$26,849.00	$15,354.00	$19,294.00	$2,123.00
Total:	**$26,849.00**	**$15,354.00**	**$19,294.00**	**$2,123.00**

Schedule B - Part I
Contributors

CAMP FIRE USA **86-0104417**

Organization Type:

Filers of:

Form 990 or 990-EZ

- [X] 501(c)(3) Organization
- [ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- [ ] 527 Political Organization

Form 990PF

- [ ] 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 section 501(c)(7), (8), (10) organizations can check boxes for both the General Rule and a Special Rule -- see instructions.)

General Rule--

- [ ] For organizations 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--

- [X] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 3313 % support test under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

- [ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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.)

$0.00

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B - Part I
Contributors

CAMP FIRE USA 86-0104417

Name and Address	Contribution	Type

NOT OPEN TO PUBLIC INSPECTION

5/10/07

Form **8868** (Rev. April 2007) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

- 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.

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

Section 501(c) corporations 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.

Electronic Filing (*e-file*). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization: Camp Fire Council of Greater Arizona	**Employer identification number** 86 0104417
	Number, street, and room or suite no. If a P.O. box, see instructions. 5510 N. 40th Street, Suite 107	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Phoenix, AZ 85018	

Check type of return to be filed (file a separate application for each return):

- ☑ Form 990
- ☐ Form 990-BL
- ☐ Form 990-EZ
- ☐ Form 990-PF
- ☐ Form 990-T (corporation)
- ☐ Form 990-T (sec. 401(a) or 408(a) trust)
- ☐ Form 990-T (trust other than above)
- ☐ Form 1041-A
- ☐ Form 4720
- ☐ Form 5227
- ☐ Form 6069
- ☐ Form 8870

- The books are in the care of ▶ The Organization

Telephone No. ▶ (602) 954-7544 FAX No. ▶ (602) 954-7352

- 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 will cover.

1 I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until ________ , 20____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☐ calendar year 20____ or

▶ ☐ tax year beginning ________ , 20____, and ending ________ , 20____

2 If this tax year 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 or 990-T, 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, or, if required, deposit with FTD coupon or, 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.