Return of Organization Exempt From Income Tax

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

OMB No 1545 0047 2006

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the 2006 calendar year, or tax year beginning 5/01 , 2006, and ending 4/30	, 2007			
В	oneck if applicable	yer Identification Number			
	X Address change Please use CHRISTIAN CHARITIES USA 94-	1-3255961			
	Name change or print 1100 LARKSPUR LANDING CIRCLE #340 E Teleph	none number			
	\rightarrow 1 can ITADECDID CA 0/10/20-19/27	00) 396-3688			
	Final return instruc-				
		Other (specify)			
	Application pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt H and I are not applicable to section				
	charitable trusts must attach a completed Schedule A H (a) Is this a group return for	affiliates? Yes X No			
_	(Form 990 or 990-EZ). H (b) If Yes, enter number of	affiliates •			
G	Web site: ► WWW.CCUSA.ORG H (c) Are all affiliates included				
J	Organization type ((If 'No, 'atlach a list See (check only one) X 501(c) 3 4947(a)(1) or 527 H (d) is this a separate return (
<u></u>	(check only one) ► X 501(c) 3 (insert no) 4947(a)(1) or 527 H (d) Is this a separate return to Check here ► If the organization is not a 509(a)(3) supporting organization and its				
n	gross receipts are normally not more than \$25,000. A return is not required, but if the I Group Exemption I				
		organization is not required			
ī		orm 990, 990-EZ, or 990-PF)			
_	art I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the Instruc	ctions.)			
1	1 Contributions, gifts, grants, and similar amounts received				
	a Contributions to donor advised funds				
	b Direct public support (not included on line 1a) 1b 4,058,769.				
	c Indirect public support (not included on line 1a)				
	d Government contributions (grants) (not included on line 1a)				
	e Total (add lines la through 1d) (cash \$ 4,058,769. noncash \$)	1e 4,058,769.			
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5			
	6a Gross rents . 6a				
	b Less rental expenses 6b				
	c Net rental income or (loss) Subtract line 6b from line 6a	6 c			
R	7 Other investment income (describe	7			
R E V	8a Gross amount from sales of assets other (A) Securities (B) Other				
E N U	than inventory 8a				
Ü	b Less cost or other basis and sales expenses 8b				
	c Gain or (loss) (attach schedule)				
	d Net gain or (loss) Combine line 8c, columns (A) and (B)	8d			
	9 Special events and activities (attach schedule) If any amount is from gaming, check here				
	a Gross revenue (not including \$ of contributions				
	reported on line 1b) b Less direct expenses other than fundraising expenses 9b				
	2 2000 dillott oxportion trial transfer of	9 c			
η,	c Net income or (loss) from special events. Subtract line 9b from line 9a				
5	10a Gross sales of inventory, less returns and allowances b Less cost of goods sold 10a 10b	İ			
3		10 c			
⊅.	c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a 11 Other revenue (from Part VII, line 103) RECEIVED	11			
~ું.	11 Other revenue (from Part VII, line 103) RECEIVED RECEIVED	12 4,058,769.			
Up I J U E	12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	13 3,957,896.			
⋑ £	13 Program services (from line 44, column (B)) 14 Management and general (from line 44, column (C)) SEP 24 2007	14 17,469.			
⊸ ĝ	14 Management and general (from line 44, column (C))	15 83,404.			
T i	15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule) OGDEN, UTAH	16			
ZE		17 4,058,769.			
<u>z,</u>		18 0.			
0 S. S	18 Excess or (deficit) for the year Subtract line 17 from line 12 19 Net assets or fund balances at beginning of year (from line 73, column (A))	19 0.			
ENSES ASSE	20 Other changes in net assets or fund balances (attach explanation)	20			
√√ Γ S	21 Net assets or fund balances at end of year Combine lines 18, 19, and 20	21 0.			
	1 E. 110, 0000,0 of fully politicod at other of your recommon for the following				

Form 990 (2006) CHRISTIAN CHARITIES USA 94-3255961 Page 2 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 Part II Do not include amounts reported on line (C) Management (B) Program (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I and general services 22a Grants paid from donor advised funds (attach sch) (cash \$ non-cash If this amount includes foreign grants, check here. 22b Other grants and allocations (att sch) SEE STM (cash Ś 3813221. non-cash Ś If this amount includes 22 b 3,813,221 3,813,221 foreign grants, check here. 23 Specific assistance to individuals 23 (attach schedule). Benefits paid to or for members 24 24 (attach schedule) 25 a Compensation of current officers, directors, key employees, etc listed in 0 0 0. 25 a 0 Part V-A (attach sch) **b** Compensation of former officers, directors, key employees, etc listed in 0. 0. 0 0. Part V-B (attach sch) 25 b 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)0. 0 0 0. 25 c (attach schedule) Salaries and wages of employees not included on lines 25a, b, and c 26 26 Pension plan contributions not 27 27 included on lines 25a, b, and c Employee benefits not included on lines 25a · 27 28 28 29 29 Payroll taxes 30 Professional fundraising fees 30 31 31 Accounting fees 32 Legal fees 32 33 33 Supplies 34 34 Telephone 35 35 Postage and shipping 36 36 Occupancy Equipment rental and maintenance 37 37 38 38 Printing and publications. 2,082 2,082 39 Travel 39 40 Conferences, conventions, and meetings 40 41 41 Interest 42 42 Depreciation, depletion, etc (attach schedule). 43 Other expenses not covered above (itemize) 144,675 15,387 83,404 243,466. a SEE STATEMENT 43 a 43b ь 43 c 43 d 43 e

	1	431			<u> </u>	
	9	43 g				
44	Total functional expenses Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	4,058,769.	3,957,896.	17,469.	83,404.
Are f 'Y \$	any joint costs from a combined education (es,' enter (i) the aggregate amount of these (iii) the amount all (undraising \$	al can e joint	npaign and fundraising so	, (ii) the a	mount allocated to Prog	Yes X No gram services e amount allocated
ВА	Α		TEEA0102L 01	/23/07		Form 990 (2006)

Part III	Statement of Program Service Accomplishments	
Form 990 is	s available for public inspection and, for some people, serves as the primary or sole source of information about a particular	
a-aa	a Haw the public personner of account of a contract of a contract of the personner by the personner of the contract of the con	_

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. TO DISTRIBUTE FUNDS FROM FUND DRIVES Program Service Expenses What is the organization's primary exempt purpose? ▶ (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others) 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.) a SEE STATEMENT 3 3,957,896. (Grants and allocations 705,114.) If this amount includes foreign grants, check here (Grants and allocations) If this amount includes foreign grants, check here (Grants and allocations (Grants and allocations \$) If this amount includes foreign grants, check here e Other program services ►) If this amount includes foreign grants, check here (Grants and allocations f Total of Program Service Expenses (should equal line 44, column (B), Program services) 3,957,896.

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Form 990 (2006)

Not	e: Where required, attached schedules and amounts with column should be for end-of-year amounts only	ın the description	(A) Beginning of year		(B) End of year		
	45 Cash – non-interest-bearing		·	45			
	46 Savings and temporary cash investments		352,081.	46	471,399.		
		1 1					
	47 a Accounts receivable	47 a					
	b Less allowance for doubtful accounts	47 b		47 c			
		4 506 011					
	48a Pledges receivable	48a 4,526,011.	2 156 062	40 -	2 744 200		
	b Less allowance for doubtful accounts	48b 781,712.	3,156,862.	48 c	3,744,299.		
	49 Grants receivable			49			
	50 a Receivables from current and former officers, director employees (attach schedule)	ors, trustees, and key		50 a			
A	b Receivables from other disqualified persons (as defined and persons described in section 4958(c)(3)(B) (attack)	ned under section 4958(f)(1)) ich schedule) 		50 b			
ASSETS	51 a Other notes and loans receivable (attach schedule)	51 a					
s	b Less allowance for doubtful accounts	51 b		51 c			
	52 Inventories for sale or use			52			
	53 Prepaid expenses and deferred charges			53			
	54a Investments – publicly-traded securities	► Cost FMV		54 a			
	b Investments – other securities (attach sch)	► Cost FMV		54 b			
	55 a Investments – land, buildings, & equipment basis	55 a					
	b Less accumulated depreciation (attach schedule)	55 b		55 c			
	56 Investments - other (attach schedule)	, ,		56			
	57 a Land, buildings, and equipment basis	57 a		1 }			
	b Less, accumulated depreciation		u	57.			
	(attach schedule)	57b		57 c			
	58 Other assets, including program-related investments	`		58			
	(describe ► 59 Total assets (must equal line 74) Add lines 45 throi	¹	3,508,943.	59	4,215,698.		
_	60 Accounts payable and accrued expenses	ugn Ju	1,889.	60	1,900.		
	61 Grants payable			61			
L	62 Deferred revenue			62			
I A B							
ı	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63			
Ĩ	64a Tax-exempt bond liabilities (attach schedule)			64 a			
T I E S	b Mortgages and other notes payable (attach schedule)			64 b			
Š	65 Other liabilities (describe ► SEE STATEMENT	3,507,054.	65	4,213,798.			
	66 Total liabilities. Add lines 60 through 65		3,508,943.	66	4,215,698.		
N	Organizations that follow SFAS 117, check here 🕨 🗌	and complete lines 67					
N E T	through 69 and lines 73 and 74						
	67 Unrestricted			67			
ASSETS	68 Temporarily restricted			68			
Š	69 Permanently restricted	. 🗆		69			
Q R	Organizations that do not follow SFAS 117, check here	and complete lines					
	70 through 74			70			
UZD H	 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equ 		71				
B	l · · · · · · · · · · · · · · · · · · ·						
Ä				72			
BALAZCES	73 Total net assets or fund balances. Add lines 67 thro 72 (Column (A) must equal line 19 and column (B)	ougn 69 or lines 70 through must equal line 21)	0.	73	0.		
	74 Total liabilities and net assets/fund balances. Add		3,508,943.	74	4,215,698.		

	rm 990 (2006) CHRISTIAN CHARITIES USA		<u> 255961</u>	Page 5
P	art IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue pe	r Retu	urn (See	the
	instructions.)			
	Title compared and all control of the control of th		_	252 655
a	Total revenue, gains, and other support per audited financial statements.	<u> </u>	a	353,655.
b	Amounts included on line a but not on Part I, line 12.	-		
	1 Net unrealized gains on investments b1			
	2Donated services and use of facilities b2			
	3Recoveries of prior year grants b3			
	40ther (specify)			
	b4			
	Add lines b1 through b4	-	_b	252 655
¢	Subtract line b from line a	 -	с	353,655.
d	Amounts included on Part I, line 12, but not on line a:			
	1 Investment expenses not included on Part I, line 6b			
	2Other (specify)			
	SEE STM 5 d2 3,705,1	.14.		
	Add lines d1 and d2	-		,705,114.
e	Total revenue (Part I, line 12) Add lines c and d			<u>,058,769.</u>
P	art IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses	per Re	eturn	
		ŀ		252 555
а	Total expenses and losses per audited financial statements	-	a	353,655.
þ	Amounts included on line a but not on Part I, line 17		1	
	1 Donated services and use of facilities b1		1	
	2Prior year adjustments reported on Part I, line 20		1	
	3Losses reported on Part I, line 20			
	4Other (specify)			
	b4			
	Add lines b1 through b4	ļ.	b	
C	Subtract line b from line a	L	С	353,655.
d	Amounts included on Part I, line 17, but not on line a:		1	
	1 Investment expenses not included on Part I, line 6b			
	2Other (specify)			
	SEE STMT 6 d2 3,705,1	14.		
		- 1		705 114

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 and deferred compensation plans	(E) Expense account and other allowances
BRIAN BISSELL	TREASURER	0.	0.	0.
1100 LARKSPUR LANDING CIR, 3	10 1			
LARKSPUR, CA 94939-1827				
BRUCE JOHNSON	SECRETARY	0.	0.	0.
1100 LARKSPUR LANDING CIR, 3	40 1			
LARKSPUR, CA 94939-1827				
THOMAS SIMONE	BOARD MEMBER	0.	0.	0.
1100 LARKSPUR LANDING CIR, 3	10 1			
LARKSPUR, CA 94939-1827				
CHAPLIAN WAYNE HOFFMANN	PRESIDENT	0.	0.	0.
1100 LARKSPUR LANDING CIR, 3	10 1			
LARKSPUR, CA 94939-1827		 		
BRUCE PATTON	VICE PRESIDENT	0.	0.	0.
1100 LARKSPUR LANDING CIR, 3	10 1			
LARKSPUR, CA 94939-1827				
SYBIL CARTER	BOARD MEMBER	0.	0.	0.
1100 LARKSPUR LANDING CIR, 3	10 1			
LARKSPUR, CA 94939-1827				
DAA	TEFANIOSI O	1/18/07		Earm 000 (2006)

3,705,114.

4,058,769.

Add lines d1 and d2

Total expenses (Part I, line 17) Add lines c and d

Form 990 (2006) CHRISTIAN CHARITIES US	SA		94-32559	61	Р	age 6
Part V-A Current Officers, Directors, Tru		nployees (continue			Yes	No
75 a Enter the total number of officers, directors, and trustees p						
b Are any officers, directors, trustees, or key em- listed in Schedule A, Part I, or highest comper A, Part II-A or II-B, related to each other throu identifies the individuals and explains the relations.	nsated professional an gh family or business	d other independent cor	ntractors listed in Schedu	ees le 75 b		Х
c Do any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest comper A, Part II-A or II-B, receive compensation from	oloyees listed in form s insated professional and in any other organization	d other independent cor ins, whether tax exempt	ntractors listed in Schedu	s le		
to the organization? See the instructions for the	ne definition of 'related	organization'		75 c		_ X
If 'Yes,' attach a statement that includes the in		the instructions				
d Does the organization have a written conflict of				75 d		
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, direct during the year, list that person below a the instructions)	or, trustee, or key emp	lovee received compen-	sation or other benefits (d	described	below) e
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allow		
NONE						
				_		
	<u> </u>					
			<u> </u>			
Part VI Other Information (See the Inst	ructions.)				Yes	No
76 Did the organization make a change in its acti If 'Yes,' attach a detailed statement of each of	vities or methods of conange	onducting activities?		76		Х
77 Were any changes made in the organizing or If 'Yes,' attach a conformed copy of the change		out not reported to the I	RS?	77	<u> </u>	Х
78a Did the organization have unrelated business b If 'Yes,' has it filed a tax return on Form 990-1	gross income of \$1,00	0 or more during the ye	ar covered by this return?	7 78a 78b	N,	X A
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	on, or substantial contr	action during the		79		х
80 a Is the organization related (other than by assomethin, governing bodies, trustees, office	ociation with a statewic ers, etc, to any other e	le or nationwide organizexempt or nonexempt or	ration) through common	80 a		х
b If 'Yes,' enter the name of the organization ▶	N/A	· 	exempt or nonexem			
81 a Enter direct and indirect political expenditures			81 a	0.		
b Dud the excession file Form 1120 DOL for the		···· ,		<u> </u>		v

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Form **990** (2006)

Ye	Pag es N
2a	y
3a X	х
3b X	Х
4a	>
4ь	N/A
	N/A
Ì	
5 g	N/A
5 h	N/A
į	
8a	}
8ь	}
9 b	
9 e	
9 f	>
9 g	
99]	
0Ь	
1 <u>827</u>	7
Ye	res N
1 b	7
orm 99	90 (20
,	1 Б

c At any time during the calendar year, did	•	tion maintain an	office outside of the l	United States?	Yes No
If 'Yes,' enter the name of the foreign countr					
92 Section 4947(a)(1) nonexempt charitable	-				N/A ►
and enter the amount of tax-exempt intel				▶ 92	N/A
Part VII Analysis of Income-Produc				t 512 512 or 514	
Note: Enter gross amounts unless		business incom		ection 512, 513, or 514	(E)
otherwise indicated	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
93 Program service revenue					
a					
b			 		
с		_			
d					
е					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invents					
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property b not debt-financed property					
98 Net rental income or (loss) from pers prop					
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					
b					
c					
d					
e				ļ	
104 Subtotal (add columns (B), (D), and (E))	1 (5))				0.
105 Total (add line 104, columns (B), (D), a Note: Line 105 plus line 1e, Part I, should equ		t on line 12 Port			
Part VIII Relationship of Activities to				es (See the instruc	rtions)
Line No. Explain how each activity for which					
of the organization's exempt purpo	ses (other th	an by providing f	unds for such purpos	es)	e accomplishment
N/A					
					
Part IX Information Regarding Tax		diaries and D		1	
(A)	(B)		(C)	(D)	(E)
Name, address, and EIN of corporation,	Percentage ownership in		ure of activities	Total income	End-of-year assets
partnership, or disregarded entity	Ownerstilb in	8		income	assets
N/A	+			 	
		%			
		%			
Part X Information Regarding Tra	nsfers Ass		Personal Benefit	Contracts (See the	instructions.)
a Did the organization, during the year, receive any fu					Yes X No
b Did the organization, during the year, pa	y premiums,	directly or indirec	tly, on a personal be	nefit contract?	Yes X No
Note: If 'Yes' to (b), file Form 8870 and Fo	rm 4720 (see	instructions)	 		

·Form 990 (2006) CHRISTIAN CHARITIES USA

94-3255961

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Par	inf. סרכ	ormation Regarding Transfers To a ganızatıon ıs a controllıng organızatıo	nd From Controlled En on as defined in section	i tities. Compl n 512(b)(13)	ete only if the			
	<u></u>	same a controlling organization	40 4004 0001101	(-)().			Yes	No
106	Did the r 'Yes,' co	eporting organization make any transfers to implete the schedule below for each controlled	a controlled entity as define ed entity	d in section 512	(b)(13) of the Cod	e? If		Х
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	() Descrip tran	c) otion of sfer	(I Amount o	D) of tran	sfer
a								
b								
с								
		Totals	:					
	-		···		——————————————————————————————————————		Yes	No
107	Did the r	reporting organization receive any transfers in the schedule below for each controlled	from a controlled entity as ded entity	efined in section	512(b)(13) of the	Code? If		Х
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descri	C) otion of esfer	Amount o	D) of tran	sfer
a								
b								
c	_ _							
		Totals						
108	Did the annuitie	organization have a binding written contract s described in question 107 above?	in effect on August 17, 2006	, covering the in	terest, rents, roya	ilties, and	Yes	No X
Plea Sign Here	se >	er penalties of perjury. I declare that I have examined this recorrect, and complete Declaration of preparer (other than of preparer). It is a new Signature of pricer. WAYNE W. HOFFMAN Type or print name and title	turn, including accompanying schedul officer) is based on all information of v , Preficert /W, President		nd to the best of my knowledge Slytus hu Date			
Paid Pre- pare	er's Firm	rarer's AZE & ASSOCIATES	lle q	1212		eparer's SSN eneral Instruct 0028308		(See
Use	your	s if self-loyed). 3478 BUSKIRK AVE STE	215 523-4346		EIN ► 94-25 Phone no ► (925	90179 5) 930-	0902	
BAA	IZIP -	TELMONAL IIIII, CA 74.	720 1010		THORIO TO COLO			(2006)

SCHEDULE A (Form 990 or 990-EZ)

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.)

2006

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

94-3255961 CHRISTIAN CHARITIES USA Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (b) Title and average (c) Compensation (d) Contributions (e) Expense (a) Name and address of each to employee benefit employee paid more than \$50,000 hours per week devoted to position account and other allowances compensation NONE Total number of other employees paid over \$50,000 Part II — A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See 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 SEE STATEMENT 7 139,348. Total number of others receiving over \$50,000 for professional services 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 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

Schedule A (Form 990 or 990-EZ) 2006	CHRISTIAN CHARITIES USA	94-3255961		Page 2
Part III Statements About Ac	tivities (See instructions.)		Yes	s No
During the year, has the organization to influence public opinion on a legion or incurred in connection with the logical (Must equal amounts on line 38, Pa).		ation, including any attempt expenses paid		X
Organizations that made an electior organizations checking 'Yes' must c lobbying activities	n under section 501(h) by filing Form 5768 must comple complete Part VI-B AND attach a statement giving a de	ete Part VI-A Other tailed description of the		
substantial contributors, trustees, di taxable organization with which any	on, either directly or indirectly, engaged in any of the fo irectors, officers, creators, key employees, or members a such person is affiliated as an officer, director, trustee question is 'Yes,' attach a detailed statement explaining	s of their families, or with any e, majority owner, or principal		
a Sale, exchange, or leasing of prope	erty?	2	a	X
b Lending of money or other extensio	on of credit?	2	ь	Х
$oldsymbol{c}$ Furnishing of goods, services, or fac	culities?	2	с	X
d Payment of compensation (or paym	nent or reimbursement of expenses if more than \$1,000))?	d	Х
e Transfer of any part of its income o	or assets?	2	e	Х
3a Did the organization make grants for explanation of how the organization	or scholarships, fellowships, student loans, etc ⁹ (If 'Yes n determines that recipients qualify to receive payments	s,' attach an	а	Х
b Did the organization have a section	403(b) annuity plan for its employees?	3	ь	x
c Did the organization receive or hold to preserve open space, the enviror 'Yes,' attach a detailed statement	d an easement for conservation purposes, including eas nment, historic land areas or historic structures? If		c	х
d Did the organization provide credit of	counseling, debt management, credit repair, or debt ne	egotiation services? 3	d	X
4a Did the organization maintain any d 4f and 4g	donor advised funds? If 'Yes,' complete lines 4b through	h 4g If 'No,' complete lines	a	X
b Did the organization make any taxa	able distributions under section 4966?	4	ib i	N/A
c Did the organization make a distribi	ution to a donor, donor advisor, or related person?	4	lc l	N/A_
d Enter the total number of donor adv	vised funds owned at the end of the tax year	-		N/A
e Enter the aggregate value of assets	s held in all donor advised funds owned at the end of the	ne tax year		N/A
f Enter the total number of separate funds included on line 4d) where do amounts in such funds or accounts	funds or accounts owned at the end of the tax year (exonors have the right to provide advice on the distribution	ccluding donor advised on or investment of		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

Par	l IV	Reason for Non-Private F	oundation Status (S	See instructions.)					
I cert	ıfy that	the organization is not a private	foundation because it is	(Please check only ONE ap	plicable box)	· · · · · · · · · · · · · · · · · · ·		
5	A (church, convention of churches, o	r association of churches	Section 170(b)(1)(A)(i).					
6	A school Section 170(b)(1)(A)(ii) (Also complete Part V)								
7	A I	nospital or a cooperative hospital	service organization Sec	tion 170(b)(1)(A)(iii)					
8	A 1	ederal, state, or local governmen	t or governmental unit. So	ection 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 (Al	organization operated for the beso complete the Support Schedu	nefit of a college or unive i le in Part IV-A)	rsity owned or operated by	a governme	ental unit Sect	tion 170(b)(1)(A)(iv)		
11 a	X An Se	organization that normally received the comparts of the compar	res a substantial part of it plete the Support Schedu	s support from a governme le ın Part IV-A)	ntal unit or	from the gene	ral public		
11 b	A 6	community trust. Section 170(b)(1)(A)(vi) (Also complete t	he Support Schedule in Pa	art IV-A)				
12	fro fro	organization that normally received mactivities related to its charitabing gross investment income and iganization after June 30, 1975. Se	ile, etc, functions – subje unrelated business taxabli	ct to certain exceptions, ar e income (less section 511	id (2) no mo tax) from bi	i re than 33-1/3 Jisinesses acqu	% of its support		
13	An red	organization that is not controlle quirements of section 509(a)(3)	d by any disqualified pers Check the box that describ	sons (other than foundation les the type of supporting of	managers) organization	and otherwise	meets the		
		Type I Type II		onally Integrated out the supported organiz	Type III				
	1	(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)	Is the su organization the sup organization	d) ipported on listed in	(e) Amount of support		
							-		
									
Total				<u>L</u>	<u> </u>	>	0.		
14 BAA		organization organized and oper	rated to test for public saf	ety Section 509(a)(4) (Se			990 or 990-EZ) 2006		

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

Note. Tou may use the worksheet in t	HE HISHUCHOHS TO COL	iverting ironi the acci	ual to the cash metho	or 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)	3,354,355.	2,417,589.	1,659,183.	1,099,044.	8,530,171.
16 Membership fees received	3,001,000.	2,12:,003:	270037200.		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					0.
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				11.	11.
19 Net income from unrelated business activities not included in line 18					0.
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					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.
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets.					0.
23 Total of lines 15 through 22	3,354,355.	2,417,589.	1,659,183.	1,099,055.	8,530,182.
24 Line 23 minus line 17	3,354,355.	2,417,589.	1,659,183.	1,099,055.	8,530,182.
25 Enter 1% of line 23	33,544.	24,176.	16,592.	10,991.	
26 Organizations described on line		er 2% of amount in c		► 26 a	170,604.
b Prepare a list for your records to show th supported organization) whose total gifts return. Enter the total of all these excess	for 2002 through 2005 excee	ributed by each person (oth eded the amount shown in I	ner than a governmental uni ine 26a Do not file this lis	t or publicly st with your	
c Total support for section 509(a)	(1) test Enter line 24,	column (e)		► 26 c	8,530,182.
d Add Amounts from column (e)	for lines 18	11.	19		
			26 b		11.
e Public support (line 26c minus li	· · · · · · · · · · · · · · · · · · ·			► 26e	8,530,171. 100.00 %
f Public support percentage (line		ded by line 26c (deno	minator))	► 26f	100.00 %
27 Organizations described on line a For amounts included in lines 15 name of, and total amounts rece such amounts for each year	5, 16, and 17 that were eived in each year from	m, each 'disqualified	person ' Do not file t h	is list with your retur	n. Enter the sum of
(2005)					
b For any amount included in line to show the name of, and amou \$5,000 (Include in the list organ After computing the difference be differences (the excess amounts	nt received for each y nizations described in between the amount re s) for each year	ear, that was more the lines 5 through 11b, a eceived and the large	nan the larger of (1) the same of the	ne amount on line 25 or) Do not file this list was (1) or (2), enter the s	for the year or (2) with your return. sum of these
(2005)	(2004)	(2003)		_ (2002)	
c Add Amounts from column (e) 17 d Add Line 27a total	for lines 15		16		
17	20		21	27 c	
d Add Line 27a total	a	nd line 27b total		27 d	
e Public support (line 27c total mi	nus line 27d total)			► 27e	
f Total support for section 509(a)					8
g Public support percentage (line					
h Investment income percentage			_		
28 Unusual Granter For an organiz	ation described in line	ם that ו נוו ב	ceived any finustial d	rants during 2002 thro	uun 2005 prepare a

Part V Private School Questionnaire (See Instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A						
			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	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)					
	Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a				
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b				
•	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c				
1	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d				
33	If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to					
i	a Students' rights or privileges?	33 a				
1	b Admissions policies?	33 b				
(c Employment of faculty or administrative staff?	33 c				
(d Scholarships or other financial assistance?	33 d				
•	e Educational policies?	33 e				
1	f Use of facilities?	33 f		·		
•	g Athletic programs?	33 g				
ı	h Other extracurricular activities?	33 h				
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement)			: :		
		-				
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34 a	_			
1	b Has the organization's right to such aid ever been revoked or suspended?	34 b				
35	If you answered 'Yes' to either 34a or b, please explain using an attached statement 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					
	nondiscrimination? If 'No,' attach an explanation	35				

Part	VI-A Lo	bbying Ex	penditures by Elected ONLY by an eligible	cting Public Charit organization that filed	t ies (See ınstru Form 5768)	ictions))		<u></u> _	N/A
Chec	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 (a) Affiliated group totals To be completed for all electing expenditures.									
36	. Uganizations							organizations		
37	_	•	ures to influence a legis		- •	37			- 1	
38			ures (add lines 36 and 3		,,	38				
39	Other exem	pt purpose e	expenditures.			39				
40	Total exemp	ot purpose e	xpenditures (add lines 3	38 and 39)		40				
41	Lobbying no	ontaxable an	nount Enter the amoun	t from the following tab	ole –				İ	
	If the amou	nt on line 40) is — The	lobbying nontaxable a	mount is —					
	Not over \$5	•	=	of the amount on line	40					
		but not over \$1,	• •	000 plus 15% of the excess o	` '	1				
		0 but not over \$		000 plus 10% of the excess o	1	41				
		0 but not over \$		000 plus 5% of the excess ov	er \$1,500,000					
42	Over \$17,00		۱۱,۵۰ amount (enter 25% of III	00,000		42			ł	
42 43			ne 36 Enter -0- if line 4	•		43				
44			ne 38. Enter -0- if line 4.			44				
			amount on either line 43		ile Form 4720	1.7				
				Averaging Period		n 501	(h)			
	(Some organi	izations that made a se-	ction 501(h) election do e the instructions for li	o not have to co	mplete	all of the fi	ve col	umns	below
				Lobbying Expend	ditures During 4	-Year	Averaging I	Period		
	Calendar ye (or fiscal ye beginning i	ear	(a) 2006	(b) 2005	(c) 2004			d) 003		(e) Total
45	Lobbying no amount	ontaxable								
46	Lobbying ceilin (150% of line									
47	Total lobbyi expenditure									
48	Grassroots taxable amo	1								
49	Grassroots ceil (150% of line									
	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 instructions) N/A During the year, did the organization attempt to influence national, state or local legislation, including any									
Durir atten	ng the year, on the second to the second to influer	did the orgaince public of	nization attempt to influ Dinion on a legislative m	ence national, state or natter or referendum, th	local legislation prough the use	n, includ of	ling any	Yes	No	Amount
	a Volunteers									
	b Paid staff or management (Include compensation in expenses reported on lines c through h.)									
_	: Media adve		anielatore, or the public							<u> </u>
			egislators, or the public ed or broadcast stateme	ents				$\vdash \dashv$		
			ations for lobbying purp					$\vdash \vdash \vdash$		
		•	slators, their staffs, gove		egislative body					
_	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means									
			ures (add lines c throug		-					
	If 'Yes' to an	ov of the abov	ve, also attach a statemer	nt giving a detailed descr	untion of the John	vino ac	tivities			

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the	e reporting organization of	directly or in	ndirectly engage in any of the following	ng with any other organization describ ting to political organizations?	ed in section	on 50	1(c)
	•		o a noncharitable exempt organizati		Γ	Yes	No
(i)Ca	, -	g=:=			51 a (i)		X
(ii)Ot	ther assets				a (ii)		X
b Other	transactions						
(i)Sa	ales or exchanges of asse	ets with a no	oncharitable exempt organization		b (i)		_X_
(ii) Ρι	urchases of assets from a	a noncharita	ble exempt organization.		b (ii)		X
	ental of facilities, equipm		r assets		b (iii)		X
` '	eimbursement arrangeme	ents			b (iv)		X
	oans or loan guarantees				b (v)		<u>X</u>
			ip or fundraising solicitations		b (vi)		<u>X</u>
			cits, other assets, or paid employees complete the following schedule. Co by the reporting of the growing column (d) the value of the growing	lumn (b) should always show the fair organization received less than fair m oods, other assets, or services receive	market value	ue of	
(a) Line no	(b) Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and			
	Amount involved	ivallie of i		Description of dansiers, dansactions, and		igenien	
N/A					_ _		
				· · · · · · · · · · · · · · · · · · ·		_	
							
descri	organization directly or i bed in section 501(c) of s,' complete the following	the Code (of	iliated with, or related to, one or mo ther than section 501(c)(3)) or in sec	I re tax-exempt organizations ction 527?	► Ye	s X	No
	(a) Name of organization		(b) Type of organization	(c) Description of relation	nship		
N/A							
							
_ 							
		 					
	-						

2006

FEDERAL STATEMENTS

PAGE 1

CHRISTIAN CHARITIES USA

94-3255961

STATEMENT 1 FORM 990, PART II, LINE 22B OTHER GRANTS AND ALLOCATIONS

CASH GRANTS AND ALLOCATIONS

DONEE'S NAME:

ESTIMATED DISTRIBUTIONS-SCH 1

AMOUNT GIVEN:

\$ 3,705,114.

DONEE'S NAME:

MEMBER AGENCY DISTR-SCH 1

108,107.

AMOUNT GIVEN:

I**:**

TOTAL GRANTS AND ALLOCATIONS \$ 3,813,221.

STATEMENT 2 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	SERVICES	& GENERAL	<u>FUNDRAISING</u>
AUDIT CAMPAIGN/AGENCY SERVICES FISCAL SERVICES INSURANCE	5,280. 141,512. 29,688. 1,350.	106,134. 28,204.	5,280. 7,076. 1,484. 1,350.	28,302.
MARKETING MISCELLANEOUS ONLINE CREDIT CARD SYSTEM	55,255. 150. 10,231. TOTAL \$ 243,466.	106. 10,231. \$ 144,675.	190. 7. \$ 15,387.	55,065. 37. \$ 83,404.
	243,400.	<u> </u>	+ 13/307.	+ 00/101.

STATEMENT 3 FORM 990, PART III, LINE A STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PROGRAM
GRANTS AND SERVICE
DESCRIPTION
ALLOCATIONS EXPENSES

THE FEDERATION'S PRIMARY PURPOSE IS TO SCREEN AND CERTIFY CHARITIES THAT MEET STANDARDS FOR INCLUSION IN CORPORATE AND GOVERNMENT WORKPLACE CHARITABLE FUND DRIVES AND TO ACT AS THE CHARITIES' CENTRAL REPRESENTATIVE AND FISCAL AGENT IN THOSE DRIVES, THEREBY REDUCING FUND RAISING COSTS FOR BOTH CHARITIES AND CONTRIBUTORS. SIXTY FIVE CHARITABLE ORGANIZATIONS SERVED.

3,705,114. 3,705,114.

INCLUDES FOREIGN GRANTS: NO

TO PROVIDE TELEPHONE, PRINT AND WEB-BASED EDUCATION AND INFORMATION SERVICES FOR CONTRIBUTORS TO USE IN MAKING GIVING DECISIONS, TO TRAIN CHARITIES ON HOW TO SERVE WORKPLACE CONTRIBUTORS, TO PROVIDE LOGISTICAL SUPPORT TO FUND DRIVE ORGANIZERS, TO OPEN NEW WORKPLACE FUND DRIVES, AND TO PROVIDE NECESSARY BUSINESS SERVICES AND GIFT ACCOUNTING AND TRANSMITTAL SERVICES, WITH INDEPENDENT AUDIT. ESTIMATED NUMBER OF PEOPLE SERVED IS 10 MILLION.

252,782.

2006 [°]	FEDERAL STATEMENTS	PAGE 2
	CHRISTIAN CHARITIES USA	94-3255961
FOR	TEMENT 3 (CONTINUED) RM 990, PART III, LINE A TEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	
	DESCRIPTION INCLUDES FOREIGN GRANTS: NO \$ 3,705,114.	PROGRAM SERVICE EXPENSES \$ 3,957,896.
FOR	ATEMENT 4 RM 990, PART IV, LINE 65 HER LIABILITIES	
EST	DISTRIBUTIONS PAYABLE TO MEMBERS \$ TOTAL \$	4,213,798. 4,213,798.
FOR	ATEMENT 5 RM 990, PART IV-A, LINE D(2) HER AMOUNTS	
МЕМІ	BER DISTRIB INCLUDED AS CONTRA-REV TOTAL \$	3,705,114. 3,705,114.
FOR	ATEMENT 6 RM 990, PART IV-B, LINE D(2) HER AMOUNTS	
МЕМІ	BER DISTRIB INCLUDED AS CONTRA-REV TOTAL \$	3,705,114. 3,705,114.
SCH	ATEMENT 7 HEDULE A, PART II-A MPENSATION OF FIVE HIGHEST PAID PROFESSIONAL SERVICE CONTRACTORS	
	NAME AND ADDRESS TYPE OF SERVICE C	OMPENSATION
1100	CAMPAIGN SUPPORT O LARKSPUR LANDING CIR, STE 340 LARKSPUR, 94939-1827	139,348.
	TOTAL \$	139,348.

٠.

Outreach International

Sports Outreach Institute

Scripture Union

World Impact World Orphans

New Life Literature ASIA/USA

Suicide Prevention Care Fund

United Marriage Encounter

World Evangelical Alliance

Russian Orphan Opportunity Fund

United States Catholic Mission Association

Presbyterian Council for Chaplains and Military Personnel

Christian Charities USA Amount Africa Faith and Justice Network \$19,353 All Nations Bible Society 100.231 **Amor Ministries** 14,532 Angel Flight Samaritans 68,418 Baptist Children's Home Ministries 386,702 Bethany Christian Services 77,542 Bible Believers Fellowship, Inc. 69,335 **Bright Hope International** 9,070 28,712 Casas por Cristo Catholic Youth Foundation USA 63.012 96,403 Children's Emergency Relief Teams Children's Hunger Fund Foundation 217,148 Christian Children Education Fund 71,036 55,251 Christian Freedom International 17,813 Christian Medical & Dental Associations 37.038 Christian Orthopaedic Partners 14,309 Christian Performing Artists' Fellowship 240,173 Christian World Relief Commission To Every Nation 14,940 19,290 Dead Sea Scrolls Institute 95,434 Filipino American Rural Mission 24,340 **Great Dads** Habitat for Humanity International 798,264 14,887 Interchurch Medical Assistance, Inc. 7,273 Lost and Found, Inc. 20,161 Medical Ministry International 1,393 Mission Safety International, Inc. 17,710 Mission To Children **New Horizons Ministries** 5,259 34,484 Medical Teams International 97,531 One Way Out of Pornography Open Doors with Brother Andrew, Inc 28,585

Sum of Distribution

25,716

51,165

2,414 40,760

5,738

12,261 66,345

35,592

24,320 7,648

26.167

85.511

Youth for Christ/USA	86,930
Advancing Native Missions	18,865
Caspari Center for Biblical and Jewish Studies	7,432
Children's Compassion Fund	43,763
Christian Relief Services	39,922
Global Opportunities for Christ	17,094
IN Network	2,237
Love A Child	61,270
Methodist Mission Home	22,411
Society of St. Vincent de Paul Council of the United States	83,843
We Care America	2,730
Southeast Asia Christian Humanitarian Aid Program	11,380
Russian-American Christian University/ U.S , Inc	6,150
Persecuted Christians Care Fund	33,650
Compassion and Mercy Associates	8,640
DELTA Ministries International	4,030
Catholic Network of Volunteer Service	48,001
Catholic Religious Educators Association	42,830
Five Talents-USA, Inc	15,015
Matthew 25 Ministries	68,228
Children's Survival Fund	39,532
TOTAL	\$3,813,221