

Return of Organization Exempt From Income Tax Under section 501(c)(1), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2023 Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning , and ending

Section A: Name of organization (CAMP WATCHA WANNA DO, LTD.), EIN (46856-1166), address (P.O. BOX 1166, FORT WAYNE, IN 46856-1166), and other identifying information.

Section B: Check if applicable (Application pending, Amended return, etc.), and Section C: Tax-exempt status (501(c)(3)).

Section D: Briefly describe the organization's mission or most significant activities. THE MISSION OF CAMP WATCHA WANNA DO, LTD. IS TO PROVIDE RECREATIONAL OPPORTUNITIES AND SUPPORT FOR CHILDREN AND THEIR FAMILIES WHO ARE SURVIVING CANCER.

Section E: Activities & Governance table with columns for Number of voting members, Total number of individuals employed, and Total number of volunteers.

Section F: Revenue and Expenses table with columns for Revenue (Contributions and grants, Investment income, etc.) and Expenses (Total fundraising expenses, Salaries, etc.).

Section G: Declaration of preparer (other than officer) and signature of officer (TING KELLERMAN CPA, TREASURER).

Section H: Preparer information (CYNTHIA M. WIRNER, CPA), firm's name (Leonard J. Andorfer & Co., LLP), and firm's address (110 W Berry Street, Ste. 2202, Fort Wayne, IN 46802-2311).

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for taking part in the IRS e-file Program.

CAMP WATCHA WANNA DO, LTD.
P.O. BOX 11166
FORT WAYNE, IN 46856-1166

- [X] Your Form 8868, Application for Extension of Time to File an Exempt Organization Return for tax year ending December 31, 2023 is being filed electronically with the IRS by the services of Leonard J. Andorfer & Co., LLP.
- [X] Your extension was accepted by the IRS on 05/14/24 and the Submission Identification Number assigned to your extension is 35541920241360010790.

Since you are filing your extension electronically, PLEASE DO NOT SEND A PAPER COPY OF YOUR EXTENSION TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE EXTENSION.

Acknowledgement Process

The IRS will notify your electronic return originator when they accept your extension, usually within 48 hours. If your extension was not accepted, IRS will notify your electronic return originator of the reasons for rejection.

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.
 Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/irs-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I — Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions.	Taxpayer identification number (TIN)
File by the filing year due date for return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	
	P.O. BOX 11166	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	FORT WAYNE IN 46856-1166	

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

Application is For	Return Code	Application is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information:

Plan Name
 Plan Number
 Plan Year Ending (MM/DD/YYYY)

Part II — Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of _____
 Telephone No. _____
 Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box . If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach _____
- a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until _____, to file the exempt organization return for the organization named above. The extension is for the organization's return for: _____ or _____ calendar year _____ or _____ tax year beginning _____, and ending _____.

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

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE MISSION OF CAMP WATCHA WANNA DO, LTD. IS TO PROVIDE RECREATIONAL OPPORTUNITIES AND SUPPORT FOR CHILDREN AND THEIR FAMILIES WHO ARE SURVIVING CANCER.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **124,538** including grants of \$) (Revenue \$)
SUMMER CAMP FOR CHILDREN WITH CANCER IS PROVIDED FREE OF CHARGE.

4b (Code:) (Expenses \$) (Revenue \$)
N/A

4c (Code:) (Expenses \$) (Revenue \$)
N/A

4d Other program services (Describe on Schedule O.) (Expenses \$) (Revenue \$)
124,538

Part IV Checklist of Required Schedules (continued)

22	22	<input checked="" type="checkbox"/>	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
23	23	<input checked="" type="checkbox"/>	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J
24a	23	<input checked="" type="checkbox"/>	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a
	24a	<input checked="" type="checkbox"/>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
	24b		Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
	24c		Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?
25a	25a	<input checked="" type="checkbox"/>	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I
	25b	<input checked="" type="checkbox"/>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
26	25b	<input checked="" type="checkbox"/>	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II
27	26	<input checked="" type="checkbox"/>	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III
28	27	<input checked="" type="checkbox"/>	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV
29	28c	<input checked="" type="checkbox"/>	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M
30	29	<input checked="" type="checkbox"/>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
31	30	<input checked="" type="checkbox"/>	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I
32	31	<input checked="" type="checkbox"/>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
33	32	<input checked="" type="checkbox"/>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I
34	33	<input checked="" type="checkbox"/>	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1
35a	34	<input checked="" type="checkbox"/>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?
	35a	<input checked="" type="checkbox"/>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?
b	35b		If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2
36	35b		Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2
37	36	<input checked="" type="checkbox"/>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI
38	37	<input checked="" type="checkbox"/>	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 11c? All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a	1a	<input type="checkbox"/>	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable
b	1a	<input type="checkbox"/>	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable
c	1b	<input type="checkbox"/>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?
	1c	<input type="checkbox"/>	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 0

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **2b**

3a Did the organization have unrelated business gross income of \$1,000 or more during the year? **3a** X

b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation on Schedule O **3b**

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **4a** X

b If "Yes," enter the name of the foreign country **4b**

See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **4c**

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **5a** X

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? **5b** X

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? **5c**

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? **6a** X

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b**

7 Organizations that may receive deductible contributions under section 170(c). **7a** X

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? **7a**

b If "Yes," did the organization notify the donor of the value of the goods or services provided? **7b**

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? **7c** X

d If "Yes," indicate the number of Forms 8282 filed during the year **7d**

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **7e** X

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7f** X

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7g** X

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? **7h** X

8 Sponsoring organizations maintaining donor advised funds. **8**

a Did the sponsoring organization make any taxable distributions under section 4966? **8a**

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? **8b**

9 Sponsoring organizations maintaining donor advised funds. **9**

a Did the sponsoring organization have excess business holdings at any time during the year? **9a**

b Did the sponsoring organization make any taxable distributions under section 4966? **9b**

10 Section 501(c)(7) organizations. Enter: **10a**

a Initiation fees and capital contributions included on Part VIII, line 12 **10a**

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**

11 Section 501(c)(12) organizations. Enter: **11a**

a Gross income from members or shareholders **11a**

b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? **12a**

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b**

13 Section 501(c)(29) qualified nonprofit health insurance issuers. **13a**

a Is the organization licensed to issue qualified health plans in more than one state? **13a**

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**

c Enter the amount of reserves on hand **13c**

14a Did the organization receive any payments for indoor tanning services during the tax year? **14a** X

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O **14b**

15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? **15** X

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? **16** X

17 Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? **17**

If "Yes," complete Form 6069.

Table with columns for line numbers (2a-17) and Yes/No checkboxes.

Main form area containing questions and answers for sections 2a through 17.

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, trustee, or key employee) of more than \$100,000 from the organization and any related organizations.
- List the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees of reportable compensation from the organization or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) CARMEN DEBRUCE PRESIDENT	1.00	X	0.00	0	0
(2) MARY BAKER VICE PRESIDENT	1.00	X	0.00	0	0
(3) KAITLYN EVERETT VICE PRESIDENT	1.00	X	0.00	0	0
(4) LING KELLERMAN CPA TREASURER	1.00	X	0.00	0	0
(5) JUSTIN HANFORD SECRETARY	1.00	X	0.00	0	0
(6) HEATHER BLASIUS DIRECTOR	1.00	X	0.00	0	0
(7) BETH CLENDENEN DIRECTOR	1.00	X	0.00	0	0
(8) BEN DEHR DIRECTOR	1.00	X	0.00	0	0
(9) CONNER HOAGLAND DIRECTOR	1.00	X	0.00	0	0
(10) COLIN HOAGLAND DIRECTOR	1.00	X	0.00	0	0
(11) BECCA COCHRAN DIRECTOR	1.00	X	0.00	0	0

Part VIII Statement of Revenue		Check if Schedule O contains a response or note to any line in this Part VIII <input type="checkbox"/>	
(A)	(B)	(C)	(D)
Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
160,909			
Contributions, Gifts, Grants and Other Similar Amounts			
1a	Federated campaigns		
1b	Membership dues		
1c	Fundraising events	3,553	
1d	Related organizations		
1e	Government grants (contributions)		
1f	All other contributions, gifts, grants, and similar amounts not included above	157,356	
1g	Noncash contributions included in lines 1a-1f	24,523	
1g	Total. Add lines 1a-1f	160,909	
Program Service Revenue			
2a	Business Code		
2b	All other program service revenue		
2c			
2d			
2e			
2f	Total. Add lines 2a-2f		
Other Revenue			
3	Investment income (including dividends, interest, and other similar amounts)	2,235	
4	Income from investment of tax-exempt bond proceeds		
5	Royalties		
6a	Gross rents		
6b	Less: rental expenses		
6c	Rental inc. or (loss)		
6d	Net rental income or (loss)		
7a	Gross amount from sales of assets other than inventory		
7b	Less: cost or other basis and sales exps.		
7c	Gain or (loss)	1,021	
8a	Gross income from fundraising events (not including \$3,553 of contributions reported on line 1c). See Part IV, line 18	50,352	
8b	Less: direct expenses	23,095	
8c	Net income or (loss) from fundraising events	27,257	
9a	Gross income from gaming activities. See Part IV, line 19		
9b	Less: direct expenses		
9c	Net income or (loss) from gaming activities		
10a	Gross sales of inventory, less returns and allowances		
10b	Less: cost of goods sold		
10c	Net income or (loss) from sales of inventory		
11a	Business Code		
11b			
11c			
11d	All other revenue		
11e	Total. Add lines 11a-11d	1,021	
12	Total revenue. See instructions	191,422	2,235

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

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.			
(A)	(B)	(C)	(D)
Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		
2	Grants and other assistance to domestic individuals. See Part IV, line 21		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		
4	Benefits paid to or for members		
5	Compensation of current officers, directors, trustees, and key employees	9,328	9,328
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		
7	Other salaries and wages		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		
9	Other employee benefits		
10	Payroll taxes		
11	Fees for services (nonemployees):		
a	Management		
b	Legal		
c	Accounting		
d	Lobbying		
e	Professional fundraising services. See Part IV, line 17		
f	Investment management fees	325	325
9	Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)		
12	Advertising and promotion	1,627	1,627
13	Office expenses	1,540	145
14	Information technology	2,801	2,801
15	Royalties		
16	Occupancy	41,004	
17	Travel	51	51
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		
19	Conferences, conventions, and meetings	6,153	
20	Interest		
21	Payments to affiliates		
22	Depreciation, depletion, and amortization	1,587	1,384
23	Insurance	5,674	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		
a	CAMP EXPENSES	49,229	
b	MISCELLANEOUS	1,774	1,774
c	PROGRAMMING	596	
d	SPECIAL EVENTS	100	100
e	All other expenses		
25	Total functional expenses. Add lines 1 through 24e	124,538	14,373
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	149,774	10,863

Part X Balance Sheet

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

		(A) Beginning of year	(B) End of year
1	Cash—non-interest-bearing	378,739	410,182
2	Savings and temporary cash investments		
3	Pledges and grants receivable, net		
4	Accounts receivable, net		
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		
7	Notes and loans receivable, net		
8	Inventories for sale or use		
9	Prepaid expenses and deferred charges		
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	26,385	
	b Less: accumulated depreciation	13,476	
		10a	10b
11	Investments—publicly traded securities		
12	Investments—other securities. See Part IV, line 11	66,257	75,337
13	Investments—program-related. See Part IV, line 11		
14	Intangible assets		
15	Other assets. See Part IV, line 11		
16	Total assets. Add lines 1 through 15 (must equal line 33)	450,991	498,428
17	Accounts payable and accrued expenses		
18	Grants payable		
19	Deferred revenue		
20	Tax-exempt bond liabilities		
21	Escrow or custodial account liability. Complete Part IV of Schedule D		
22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		
23	Secured mortgages and notes payable to unrelated third parties		
24	Unsecured notes and loans payable to unrelated third parties		
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	469	16
26	Total liabilities. Add lines 17 through 25	469	16
27	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.	450,522	498,412
28	Net assets without donor restrictions		
29	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.		
30	Capital stock or trust principal, or current funds		
31	Paid-in or capital surplus, or land, building, or equipment fund		
32	Retained earnings, endowment, accumulated income, or other funds	450,522	498,412
33	Total liabilities and net assets/fund balances	450,991	498,428

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

1	Total revenue (must equal Part VIII, column (A), line 12)	191,422
2	Total expenses (must equal Part IX, column (A), line 25)	149,774
3	Revenue less expenses. Subtract line 2 from line 1	41,648
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	450,522
5	Net unrealized gains (losses) on investments	6,242
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain on Schedule O)	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	498,412

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

1	Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	<input checked="" type="checkbox"/>	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.		
	<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant?	<input checked="" type="checkbox"/>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.		
	<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	81,384	70,477	84,847	112,890	160,909	510,507
2						
3						
4	81,384	70,477	84,847	112,890	160,909	510,507
5						
6						
Total	81,384	70,477	84,847	112,890	160,909	510,507

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	81,384	70,477	84,847	112,890	160,909	510,507
8						
9						
10						
11						
12						
13						
Total support	81,384	70,477	84,847	112,890	160,909	510,507

Section C. Computation of Public Support Percentage

Line	2023	2022
14	98.02%	14
15	97.74%	15

- 14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))
- 15 Public support percentage from 2022 Schedule A, Part II, line 14
- 16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
- 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Section A. All Supporting Organizations

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Part IV Supporting Organizations

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1						
2						
3						
4						
5						
6						
7a						
b						
c						
8						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9						
10a						
b						
c						
11						
12						
13						
14						

Section C. Computation of Public Support Percentage

15	Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33 1/3% support tests — 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

11		Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? b A family member of a person described on line 11a above? c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes," to line 11a, 11b, or 11c, provide detail in Part VI.	11a	11b	11c
Yes	No				

Section B. Type I Supporting Organizations		
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
Yes	No	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2
Yes	No	

Section D. All Type III Supporting Organizations		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1
Yes	No	

Section E. Type III Functionally Integrated Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	1	2	3
Yes	No			

1		Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).	
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes," or "No," provide details in Part VI.	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

(see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Section E - Distribution Allocations (see instructions)	
1	2	(i)	(ii)
Amounts paid to supported organizations to accomplish exempt purposes	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	Excess Distributions	Underdistributions Pre-2023
1	2	(iii)	(iv)
Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	Administrative expenses paid to accomplish exempt purposes of supported organizations	Amounts paid to acquire exempt-use assets	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)
3	4	5	6
5	6	7	8
Other distributions (describe in Part VI). See instructions.	Total annual distributions. Add lines 1 through 6.	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	9
9	10	11	12
Distributable amount for 2022 from Section C, line 6	Line 8 amount divided by line 9 amount	1	2
1	2	3	4
Distributable amount for 2023 from Section C, line 6	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.	3	4
5	6	7	8
Total of lines 3a through 3e	Applied to underdistributions of prior years	Applied to 2023 distributable amount	Carryover from 2018 not applied (see instructions)
9	10	11	12
Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	Distributions for 2023 from Section D, line 7.	Applied to underdistributions of prior years	Applied to 2023 distributable amount
13	14	15	16
Remainder. Subtract lines 4a and 4b from line 4.	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	Remainder. Subtract lines 4a and 4b from line 4.	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.
17	18	19	20
Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.	Excess distributions carryover to 2024. Add lines 3j and 4c.	Breakdown of line 7:
21	22	23	24
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
25	26	27	28
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
29	30	31	32
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
33	34	35	36
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
37	38	39	40
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
41	42	43	44
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
45	46	47	48
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
49	50	51	52
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
53	54	55	56
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
57	58	59	60
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
61	62	63	64
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
65	66	67	68
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
69	70	71	72
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
73	74	75	76
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
77	78	79	80
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
81	82	83	84
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
85	86	87	88
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
89	90	91	92
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
93	94	95	96
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
97	98	99	100
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
101	102	103	104
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
105	106	107	108
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
109	110	111	112
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
113	114	115	116
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
117	118	119	120
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
121	122	123	124
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
125	126	127	128
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
129	130	131	132
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
133	134	135	136
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
137	138	139	140
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
141	142	143	144
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
145	146	147	148
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
149	150	151	152
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
153	154	155	156
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
157	158	159	160
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
161	162	163	164
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
165	166	167	168
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
169	170	171	172
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
173	174	175	176
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
177	178	179	180
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
181	182	183	184
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
185	186	187	188
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
189	190	191	192
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
193	194	195	196
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022
197	198	199	200
Excess from 2019	Excess from 2020	Excess from 2021	Excess from 2022

Supplemental information area with horizontal lines for text entry.

Part VI

Schedule A (Form 990) 2023

CAMP WATCHA WANNA DO, LTD.

35-1847286

Supplemental information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

2023

OMB No. 1545-0047

Name of the organization

CAMP WATCHA WANNA DO, LTD.

Organization type (check one):

Filters of: Section:

Form 990 or 990-EZ 501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (i) \$5,000; or (ii) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (iii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

No. (a)	Name, address, and ZIP + 4 (b)	Total contributions (c)	Type of contribution (d)
6	PARK COMMUNITY CREDIT UNION 2515 BLANKENBAKER PARKWAY LOUISVILLE KY 40299	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	INDIANA AUTO AUCTION 4425 W WASHINGTON CENTER ROAD FORT WAYNE IN 46818	\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	JOURNAL GAZETTE FOUNDATION INC 701 S CLINTON STREET FORT WAYNE IN 46802	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	KOA CARES CAMPS 2981 FORD ST EXT PMB179 OGDENSBURG NY 13669	\$ 8,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	PREFERRED AUTO GROUP 9134 LIMA ROAD FORT WAYNE IN 46818	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
1	THEIME FAMILY FOUNDATION 10925 BULLRUSH DRIVE VENICE FL 34293	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Name of organization: **CAMP MATCHA WANNA DO, LTD.**
 Employer identification number: **35-1847286**

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	LIV IT UP FOR CHILDHOOD CANCER P.O. BOX 22 PLEASANT LAKE IN 46779	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	APPLESEED QUILTERS GUILD P.O. BOX 10484 FORT WAYNE IN 46852	\$ 10,500	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Part I
 Name of organization: **CAMP MATCHA WANNNA DO, LTD.**
 Employer identification number: **35-1847286**

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	150 QUILTS	\$ 10,500	02/01/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Name of organization
CAMP WATCHA WANNA DO, LTD.

Employer identification number
35-1847286

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

CAMP WATCHA WANNA DO, LTD.

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

35-1847286

OMB No. 1545-0047 2023 Open to Public Inspection

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-5: Total number at end of year, Aggregate value of contributions to (during year), Aggregate value of grants from (during year), Aggregate value at end of year. Rows 6-7: Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use (for example, recreation or education), Preservation of a historically important land area, Protection of natural habitat, Preservation of open space.
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included on line 2a
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where properly subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(iii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Table with 4 columns: Held at the End of the Tax Year, 2a, 2b, 2c, 2d. Row 1: 1, 1, 1, 1, 1

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

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

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
a Revenue included on Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				12,909
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Description of property				
(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	

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

Part VI Land, Buildings, and Equipment

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

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

(iii) Related organizations? Yes No

(i) Unrelated organizations? Yes No

organization by:

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

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

c Term endowment %

b Permanent endowment %

a Board designated or quasi-endowment %

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

g End of year balance				
f Administrative expenses	254	268	337	74,417
e Other expenditures for facilities and programs				
d Grants or scholarships				
c Net investment earnings, gains, and losses	9,310	6,217	11,776	62,978
b Contributions				
1a Beginning of year balance	47,973	57,029	62,978	62,978
(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

Part V Endowment Funds

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

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

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

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

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

Part IV Escrow and Custodial Arrangements

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

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

a Public exhibition

b Scholarly research

c Preservation for future generations

d Loan or exchange program

e Other

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

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

Part VIII

Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))	75,337	75,337 Market

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

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

Part IX

Other Assets

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

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

Part X

Other Liabilities

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

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

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

THE PURPOSE OF ENDOWMENT FUNDS IS TO ASSURE THE CONTINUANCE OF THE ORGANIZATION IN PERPETUITY, ESPECIALLY IN TIMES OF ECONOMIC DOWNTURN. EARNINGS FROM ENDOWMENT FUNDS ARE AVAILABLE ON AN ANNUAL BASIS FOR OPERATIONAL EXPENSES.

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

Part XIII Supplemental Information

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
 Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
 Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

35-1847286

CAMP WATCHA WANNA DO, LTD.

Name of the organization

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations

b Internet and email solicitations

c Phone solicitations

d In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

1	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
10							
9							
8							
7							
6							
5							
4							
3							
2							
1							

Total

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

1	Gross receipts	46,267	7,638	53,905	(a) Event #1 GOLF OUTING (event type)	(b) Event #2 DINNER (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
4	Cash prizes							
5	Noncash prizes							
6	Rent/facility costs	17,800		17,800				
7	Food and beverages	1,200	2,836	4,036				
8	Entertainment		500	500				
9	Other direct expenses	497	262	759				
10	Direct expense summary. Add lines 4 through 9 in column (d)			23,095				
11	Net income summary. Subtract line 10 from line 3, column (d)			27,257				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		1		Gross revenue	
		(a) Bingo		(b) Pull tabs/instant bingo/progressive bingo	
		Yes		Yes	
		No		No	
		%		%	
2	Cash prizes				
3	Noncash prizes				
4	Rent/facility costs				
5	Other direct expenses				
6	Volunteer labor				
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities:
 a Is the organization licensed to conduct gaming activities in each of these states?
 b If "No," explain: Yes No

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?
 b If "Yes," explain: Yes No

GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

OFFICERS ARE NOT COMPENSATED.

Form 990, Part VI, Line 15b - Compensation Process for Officers

OTHER ORGANIZATIONS WITH SIMILAR RESPONSIBILITIES.

EXECUTIVE BOARD AFTER EVALUATION AND REVIEW OF COMPARABILITY DATA WITH

COMPENSATION FOR THE DEVELOPMENT DIRECTOR IS DETERMINED ANNUALLY BY THE

Form 990, Part VI, Line 15a - Compensation Process for Top Official

REPORT.

REGULAR MEETING IN CONJUNCTION WITH INDEPENDENT ACCOUNTANT'S COMPILATION

FORM 990 IS REVIEWED BY THE TREASURER AND REMAINING BOARD MEMBERS AT A

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

CAMP AND ALSO ASSIST WITH FUNDRAISERS.

VOLUNTEERS OF CAMP WATCHA WANNA DO PLAN CAMP, ASSIST DURING THE WEEK OF

Form 990, Part I, Line 6

CAMP WATCHA WANNA DO, LTD.

35-1847286

Name of the organization

Department of the Treasury
Internal Revenue Service

SCHEDULE O
(Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

Employer identification number

Open to Public Inspection

2023

OMB No. 1545-0047