

Form **990**

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

2003

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or pntt or type See Specific Instructions	C Name of organization Cambridge Camping Association, Inc.		D Employer identification number 04-6002073
		Number and street (or P O box if mail is not delivered to street address) Room/suite 99 Bishop Allen Drive		E Telephone number 617-864-0960
		City or town, state or country, and ZIP + 4 Cambridge, MA 02139		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

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

H and I are not applicable to section 527 organizations.

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

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

H(c) Are all affiliates included? N/A Yes No (If "No," attach a list)

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

I Group Exemption Number ▶

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

G Website: ▶

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

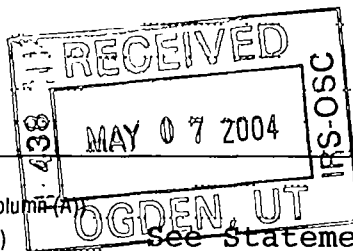
K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **537,280.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, and similar amounts received					
	a	Direct public support	1a	239,555.			
	b	Indirect public support	1b	70,167.			
	c	Government contributions (grants)	1c	82,701.			
	d	Total (add lines 1a through 1c) (cash \$ <u>392,423.</u> noncash \$ _____)	1d	392,423.			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	101,212.			
	3	Membership dues and assessments	3				
	4	Interest on savings and temporary cash investments	4	330.			
	5	Dividends and interest from securities	5	4,117.			
	6 a	Gross rents	6a				
	b	Less rental expenses	6b				
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c				
	7	Other investment income (describe ▶ _____)	7				
8 a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other			
		39,198.	8a				
		59,846.	8b				
		-20,648.	8c				
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 1	8d	-20,648.				
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>						
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a					
b	Less direct expenses other than fundraising expenses	9b					
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c					
10 a	Gross sales of inventory, less returns and allowances	10a					
		10b					
		c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11					
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	477,434.				
Expenses	13	Program services (from line 44, column (B))	13	403,597.			
	14	Management and general (from line 44, column (C))	14	56,202.			
	15	Fundraising (from line 44, column (D))	15	42,099.			
	16	Payments to affiliates (attach schedule)	16				
	17	Total expenses (add lines 16 and 44, column (A))	17	501,898.			
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-24,464.				
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	298,067.			
	20	Other changes in net assets or fund balances (attach explanation) See Statement 2	20	41,420.			
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	315,023.			

Revenue
SCANNED
MAY 18 2004



16

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (attach schedule) cash \$ _____ noncash \$ _____					
23	Specific assistance to individuals (attach schedule)					
24	Benefits paid to or for members (attach schedule)					
25	Compensation of officers, directors, etc.	54,000.	21,600.	21,600.	10,800.	
26	Other salaries and wages	171,891.	163,057.	5,375.	3,459.	
27	Pension plan contributions	4,320.		2,160.	2,160.	
28	Other employee benefits	11,551.	9,153.	1,089.	1,309.	
29	Payroll taxes	17,737.	14,411.	2,235.	1,091.	
30	Professional fundraising fees					
31	Accounting fees	4,975.		3,682.	1,293.	
32	Legal fees					
33	Supplies	11,931.	10,310.	1,001.	620.	
34	Telephone	2,904.	1,663.	602.	639.	
35	Postage and shipping	4,343.	1,489.	653.	2,201.	
36	Occupancy	36,801.	23,802.	6,499.	6,500.	
37	Equipment rental and maintenance					
38	Printing and publications	11,750.	2,807.	611.	8,332.	
39	Travel					
40	Conferences, conventions, and meetings					
41	Interest					
42	Depreciation, depletion, etc (attach schedule)	200.		200.		
43	Other expenses not covered above (itemize)					
a	_____	43a				
b	_____	43b				
c	_____	43c				
d	_____	43d				
e	See Statement 3	43e	169,495.	155,305.	10,495.	3,695.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	501,898.	403,597.	56,202.	42,099.

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

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

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? See Statement 4

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)

a	Overnight and Day Camp Placement - Information and referral about camp options. Registration and selection of camp. Arrangement of fees according to need. (Grants and allocations \$ _____)	111,151.
b	Cambridge Adventure Day Camp - Full summer, full day activities including arts and crafts and recreation for inner city Cambridge children. (Grants and allocations \$ _____)	232,419.
c	Daybreak Camps - Special needs program for children with emotional and behavioral difficulties. (Grants and allocations \$ _____)	54,791.
d	Teen Apprenticeship Program - Provides training to teenagers to be camp counsellors. (Grants and allocations \$ _____)	5,236.
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	403,597.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	33,524.	45	49,548.
	46 Savings and temporary cash investments	69,326.	46	33,656.
	47 a Accounts receivable	47a 26,297.		
	b Less allowance for doubtful accounts	47b	47c	26,297.
	48 a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	5,002.	53	8,405.
	54 Investments - securities Stmt 5 Stmt 6 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	163,637.	54	204,491.
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other		56		
57 a Land, buildings, and equipment basis	57a			
b Less accumulated depreciation	57b	200.	57c	
58 Other assets (describe)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	304,588.	59	322,397.	
Liabilities	60 Accounts payable and accrued expenses	5,868.	60	7,374.
	61 Grants payable		61	
	62 Deferred revenue	405.	62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
65 Other liabilities (describe)	248.	65		
66 Total liabilities (add lines 60 through 65)	6,521.	66	7,374.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	290,444.	67	315,023.
	68 Temporarily restricted	7,623.	68	0.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	298,067.	73	315,023.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	304,588.	74	322,397.	

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

Part VI Other Information

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> 0., section 4912 <input type="checkbox"/> 0., section 4955 <input type="checkbox"/> 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> 0.		
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> Massachusetts	90a	3
b	Number of employees employed in the pay period that includes March 12, 2003	90b	3
91	The books are in care of <input type="checkbox"/> Ms. Syrl Silberman Telephone no <input type="checkbox"/> 617-864-0960		
Located at <input type="checkbox"/> 99 Bishop Allen Drive Cambridge, MA		ZIP + 4 <input type="checkbox"/> 02139	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92 <input type="checkbox"/> N/A		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a Campership fees					101,212.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	330.	
96 Dividends and interest from securities			14	4,117.	
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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-20,648.	
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					
104 Subtotal (add columns (B), (D), and (E))		0.		-16,201.	101,212.
105 Total (add line 104, columns (B), (D), and (E))					85,011.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	User co-payment intended to defray cost of camp

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

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

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

I am preparing this return accompanying schedules and statements, and to the best of my knowledge and belief, it is true, and I am not aware of any information of which preparer has any knowledge.

Date: 5/5/04
 Type of print name and title: Sylv Silberman, Executive Director
 Date: _____ Check if: _____ Preparer's SSN or PTIN: _____

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \blacktriangleright \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b Do you have a section 403(b) annuity plan for your employees?		X
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state \blacktriangleright _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	440,790.	360,525.	600,083.	328,937.	1,730,335.
16 Membership fees received					
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	91,245.	91,645.	79,756.	80,377.	343,023.
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	7,697.	6,762.	3,828.	2,905.	21,192.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	539,732.	458,932.	683,667.	412,219.	2,094,550.
24 Line 23 minus line 17	448,487.	367,287.	603,911.	331,842.	1,751,527.
25 Enter 1% of line 23	5,397.	4,589.	6,837.	4,122.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c N/A
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2002) 0. (2001) 0. (2000) 0. (1999) 0.					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2002) 0. (2001) 0. (2000) 0. (1999) 0.					
c Add Amounts from column (e) for lines 15 1,730,335. 16 _____ 17 343,023. 20 _____ 21 _____					27c 2,073,358.
d Add Line 27a total 0. and line 27b total 0.					27d 0.
e Public support (line 27c total minus line 27d total)					27e 2,073,358.
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f 2,094,550.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 98.9882%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 1.0118%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

None

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
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?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	

33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table -	41	
If the amount on line 40 is - The lobbying nontaxable amount is -			
Not over \$500,000 20% of the amount on line 40			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000			
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000			
Over \$17,000,000 \$1,000,000			
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

N/A

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

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

Form 990	Gain (Loss) From Publicly Traded Securities			Statement	1
Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)	
See schedule attached	39,198.	59,846.	0.	-20,648.	
To Form 990, Part I, line 8	39,198.	59,846.	0.	-20,648.	

Form 990	Other Changes in Net Assets or Fund Balances		Statement	2
Description				Amount
Unrealized gain on securities				41,420.
Total to Form 990, Part I, line 20				41,420.

Form 990	Other Expenses				Statement	3
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising		
Investment counsel	2,857.		2,857.			
Professional fees	27,134.	22,539.	3,504.	1,091.		
Advertising	2,768.	2,595.	173.			
Camper transportation	22,980.	22,980.				
Camp fees	91,535.	91,535.				
Fund raising event	1,565.			1,565.		
Data processing	1,408.		1,408.			
Membership dues and fees	2,380.	2,102.	278.			
Miscellaneous	2,504.	962.	1,320.	222.		
Training	675.	675.				
Insurance	13,689.	11,917.	955.	817.		
Total to Fm 990, ln 43	169,495.	155,305.	10,495.	3,695.		

Form 990 Statement of Organization's Primary Exempt Purpose Statement 4
Part III

Explanation

To provide low cost campership to the children of Cambridge and Boston, Mass

Form 990 Non-Government Securities Statement 5

Security Description	Corporate Stocks	Corporate Bonds	Other Publicly Traded Securities	Other Securities	Total Non-Gov't Securities
Marketable equity securities	133,758.				133,758.
To 990, ln 54 Col B	133,758.				133,758.

Form 990 Government Securities Statement 6

Description	U.S. Government	State and Local Gov't	Total Gov't Securities
Marketable debt securities	70,733.		70,733.
Total to Form 990, line 54, Col B	70,733.		70,733.

Form 990 Other Revenue Included on Form 990 Statement 7

Description	Amount
Realized loss on sale of investments	-20,648.
Interest and dividends on quasi-endowment	4,117.
Total to Form 990, Part IV-A	-16,531.

Form 990	Other Expenses Included on Form 990	Statement	8
<u>Description</u>		<u>Amount</u>	
Investment counsel		2,857.	
Total to Form 990, Part IV-B		2,857.	



2003 - 2004 BOARD OF DIRECTORS

DIRECTORS

PRESIDENT

PAMELA LINGEL
44 Hudson Street
Cambridge, MA 02138
Home: (617) 868-2079
Mobile: (617) 680-0895
pamela.lingel@verizon.net

VICE PRESIDENT

DONNA CAMERON
Recreation Department
51 Inman Street
Cambridge, MA 02139
Bus: (617) 349-6237
dcameron@ci.cambridge.ma.usa
10 Kenmar Drive, #31
Billerica, MA 01821
Home: (978) 667-2765

CLERK

VAUGHAN BARTON
130 Appleton Street
Cambridge, MA 02138
Home: (617) 354-7435
mrsvbarton@aol.com

TREASURER

MATTHEW CURTIS
84 Kinnaird St.
Cambridge, MA 02139
Home: (617) 497-4332
Mobile: (617) 803-3148
mwcurtis@att.net

CYNTHIA BROWNING
133 Coolidge Hill
Cambridge, MA 02138
Home: (617) 661-9740
fb.cb@attbi.com

MARSHALL W. CARTER
15 B Maple Avenue
Cambridge, MA 02139
Home: (617) 868-5042
marshallwcarter@earthlink.com

CAROL CERF
984 Memorial Drive, #103
Cambridge, MA 02138
Home: (617) 492-6665
carolmcerf@verizon.net

BERT CHESTERTON
Cambridge Savings Bank
1374 Massachusetts Ave.
Cambridge, MA 02138
Bus: (617) 441-4321
bchester@csb.usa.com

101 Western Avenue
Cambridge, MA 02139
Home: (617) 492-0388
blkester23@attbi.com

JOHN GATES
173 Coolidge Hill
Cambridge, MA 02138
Mobile: (617) 851-5623
jgates@slowrise.com

APPLE GIFFORD
50a Old Concord Road
Lincoln, MA 01773
Home: (781) 259-9470
apple_gifford@shs.org

DAVID HANNON
20 Martin Street
Cambridge, MA 02138
Bus: (617) 367-9500
Home: (617) 491-1605
hannon@craigmacauley.com

MARY ANN JARVIS
Harvard University
Office of Community Affairs
77 Brattle Street
Cambridge, MA 02138
Bus: (617) 495-4955
maryann_jarvis@harvard.edu

3 Fairmont Street
Winchester, MA 01890

SHEILA KING
25 Hurlbut Street
Cambridge, MA 02138
Home: (617) 354-6636
basking@attbi.com

ELAINE KISTIAKOWSKY
31 Hudson Street
Cambridge, MA 02138
Home: (617) 864-9814
ekay02138@cs.com

PAM LARSEN
84 Garden Street
Cambridge, MA 02138
Home: (617) 547-6024
franksquarekids@rcn.com

PAULA MACOMBER
25 Buckingham Street
Cambridge, MA 02138
Bus: (617) 497-4400
Home: (617) 661-7908
pmacomber@hammondre.com

JANET MURRAY
115 Pearl Street
Cambridge, MA 02139
Home: (617) 868-7795
jni.murray@verizon.net

REGINA OSBORNE
16 Garfield Street
Cambridge, MA 02138
Bus: (617) 349-6711
Home: (617) 661-3856
r.osborne@verizon.net

DOUG SMITH
1241 Adams Street, F-411
Boston, MA 02124-5753
Home: (617) 296-6399
Bus: (617) 824-8538
S_Douglas_Smith@emerson.edu

CYNTHIA SUNDERLAND
35 Bowdoin Street
Cambridge, MA 02138
Home: (617) 661-3277
chs@earthlink.net

HILMA UNTERBERGER
80 C Seminary Ave., #362
Auburndale, MA 02466
Home: (617) 969-5854
samillie@aol.com
hunterberger@lasell.edu

FRED WEAVER
TANK Design
158 Sidney Street
Cambridge, MA 02139
(617) 995-4000
fweaver@tankdesign.com

HILARY WODLINGER
10 Craigie Street
Cambridge, MA 02138
Home: (617) 491-3106
eww7hcw@aol.com

STAFF

CCA OFFICE
99 Bishop Allen Drive
Cambridge, MA 02139
(617) 864-0960
ccacamp@rcn.com

EXECUTIVE DIRECTOR
SYRL SILBERMAN
Home: (781) 641-4726
syrl@rcn.com

CADC DIRECTOR
RACHEL RIEMER
riemer_cadc@yahoo.com

OFFICE MANAGER
J. L. WOODWARD
Home: (617) 491-3197
ccacamp@rcn.com



Account Title: CAMBRIDGE CAMPING ASSOCIATION AGENCY 2007581



Account Number: 2007581

Tax I.D. Number: 04-6002073

DETAIL OF LONG-TERM CAPITAL GAINS AND LOSSES

Units	Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
	POST-MAY 5TH SALES REPORTED ON FORM 1099-B: -----					
100.000	VERIZON COMMUNICATIONS	02/01/2001	09/26/2003	3,260.17	5,435.00	-2,174.83
100.000	JOHNSON & JOHNSON	02/01/2001	10/22/2003	4,967.77	4,702.50	265.27
50 000	UNILEVER NV NEW YORK SHRS NEW	08/29/2002	10/22/2003	2,900.58	2,904.87	-4.29
100.000	FIRST HEALTH GROUP CORP	02/19/2002	11/04/2003	1,801.73	2,515.39	-713.66
70 000	MARSH & MCLENNAN COS INC	02/19/2002	11/07/2003	3,146.75	3,644.55	-497.80
100 000	STAPLES INC	02/01/2001	12/04/2003	2,622.88	1,713.61	909.27
	TOTAL POST-MAY 5TH SALES REPORTED ON 1099-B			18,699.88	20,915.92	-2,216.04

	20% MAXIMUM RATE SALES REPORTED ON FORM 1099-B: -----					
75 000	AOL TIME WARNER INC	06/28/2001	03/06/2003	813.73	3,974.67	-3,160.94
150 000	ACILENT TECHNOLOGIES	03/05/2001	03/06/2003	1,897.45	6,912.00	-5,014.55
75 000	AMERICAN INTL GROUP INC	02/01/2001	03/06/2003	3,596.89	6,778.25	-3,181.36
90 000	APPLERA CORP-APPLIED BIOSYSTEMS	04/11/2001	03/06/2003	1,570.45	3,132.90	-1,562.45
200.000	NOKIA CORP SPONSORED ADR	03/05/2001	03/06/2003	2,619.92	7,026.00	-4,406.08
10,000 000	FEDERAL HOME LOAN BANK DTD 3/14/2002 (CALLABLE 3/14/2003 @ PAR)	02/19/2002	03/14/2003	10,000.00	10,000.00	
	TOTAL 20% MAXIMUM RATE SALES REPORTED ON 1099-B			20,498.44	37,823.82	-17,325.38

	TOTAL LONG-TERM SALES			39,198.32	58,739.74	-19,541.42

	Book/tax basis adjustment			-	1106.00	1106.00
	Totals			39198	59846	20648