Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Check if applicable:

For the 2020 calendar year, or tax year beginning

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

, 2020, and ending

Open to Public Inspection

, 20

D Employer identification number

	Ad	ddress change	Deer Run Retreat	Center			62-1	L7254	78		
	Na	ame change	3845 Perkins Rd	EN 27170 2700			E Telepho	ne numbe	er		
	In	itial return	Thompsons Station	n, TN 3/1/9-9/88			615	794-	2918		
	Fir	nal return/terminated									
	Αı	mended return					G Gross re				
	Αļ	oplication pending	F Name and address of principal	officer: David Gibson		` '	a group return				
			Same As C Above			H(b) Are all If "No,"	subordinates attach a list.	included? See instr	ructions Yes No		
<u> </u>		exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 527						
J			erRun.camp			• •	exemption nu				
K		of organization:	X Corporation Trust	Association Other ►	L Year of formation	on: 199	8 M s	tate of le	gal domicile: TN		
Pa	rt I	Summar									
	1	Briefly descri	be the organization's missi	on or most significant activities:0	<u>ur missic</u>	on is	to prov	<u>/ide</u>	excellent		
ce			d retreats which								
nan		and strengthens relationships with family and friends. We exist to help kids and families grow through deeper faith, stronger relationships and greater adventure.									
ver	2	Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets.									
G	3	Number of vo		ning body (Part VI, line 1a)				3	10		
S	4			of the governing body (Part VI, I				4	9		
Activities & Governance	5			calendar year 2020 (Part V, line				5	129		
ctiv	6 7a			necessary) Part VIII, column (C), line 12				6 7a	350		
A				from Form 990-T, Part I, line 11.			L	7b	<u> </u>		
_							rior Year		Current Year		
4	8	Contributions	and grants (Part VIII, line	1h)			523,9	65.	1,115,889.		
Revenue	9	Program serv	rice revenue (Part VIII, line	2g)		. 2	2,364,9	63.	437,505.		
eve	10			a), lines 3, 4, and 7d)			38,2		28,001.		
æ	11			es 5, 6d, 8c, 9c, 10c, and 11e).			162,6		8,223.		
	12			(must equal Part VIII, column (A)			3,089,8	18.	1,589,618.		
	13		•	X, column (A), lines 1-3)							
	Benefits paid to or for members (Part IX, column (A), line 4)Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								1 107 470		
es	15				L,506,9	62.	1,107,473.				
Expenses			fundraising fees (Part IX, c								
žΣ	b		sing expenses (Part IX, col		69,224.						
-	17			nes 11a-11d, 11f-24e)			L,073,9		768,539.		
	18		•	equal Part IX, column (A), line 25			2,580,8		1,876,012.		
	19	Revenue less	expenses. Subtract line 18	8 from line 12		_	508,9		-286,394.		
ts or nces	20	Total assats	(Part V. lina 16)				ng of Curren		End of Year		
Assets I Baland	20 21		• •			`	5,526,8 321,4		6,410,299. 491,255.		
Net / Fund	22			ne 21 from line 20			•				
	rt II	Signatur		ie 21 iioiii iiiie 20		. (5,205,4	30.	5,919,044.		
				rn, including accompanying schedules and st	atomonts, and to t	he heet of m	av knowlodgo	and halia	f it is true correct and		
comp	olete. D	eclaration of prepa	rer (other than officer) is based on a	all information of which preparer has any kno	wledge.	ne best of n	ny knowledge	and bene	i, it is true, correct, and		
Sig	ın	Signatu	re of officer			Da	ate				
He	re	▶ Apr:	il Kuykendall			C00					
		Type or	print name and title								
		Print/Type p	reparer's name	Preparer's signature	Date		Check	if P	PTIN		
Pai		Edward					self-employe	ed E	01405251		
Pre	epare	Firm's name									
US	e On	Firm's addre	OUT TOTAL TOUR						Firm's EIN ►		
			Thompsons Sta		Phone no.	615-	838-5441				
				shown above? See instructions.					X Yes No		
R۸	Δ Foi	r Panerwork R	eduction Act Notice, see t	he senarate instructions	TEE	A0101L 01/	19/21		Form 990 (2020)		

Par	t III	Statement of Program Service Accomplishments	E	_
1	Driofle	Check if Schedule O contains a response or note to any line in this Part II fly describe the organization's mission:	N	Ĺ
'		e Schedule 0		
	<u>500</u>	, belieute o		_
				_
				_
2		the organization undertake any significant program services during the year which	· · · · · · · · · · · · · · · · · · ·	
		n 990 or 990-EZ?	Yes X No	
2		es," describe these new services on Schedule O. the organization cease conducting, or make significant changes in how it cor	nducts, any program services? Yes X No	
3		es," describe these changes on Schedule O.	nducts, any program services:	
4	Descr Section	cribe the organization's program service accomplishments for each of its threation 501(c)(3) and 501(c)(4) organizations are required to report the amount revenue, if any, for each program service reported.	ee largest program services, as measured by expenses. of grants and allocations to others, the total expenses,	
4 a	opp cir has act are	de:)(Expenses \$1,661,250. including grants of \$er Run Camps provides both day & overnight camps e focused on deeper faith, stronger relationship portunity is available to all families regardles roumstances through our camper scholarship fund. In grown from 48 campers to over 3,000 campers. For tivities specifically designed to strengthen family designed to help students grow in their unders to world we live in & how to be good stewards of the strength of the	os, & greater adventures. This as of their socio-economic In the last 13 years this program Camily Camps & Retreats are milies. Outdoor Education activities standing, appreciation, & respect of	_ _ _
41) (Danner C	_
40	(Code	de:) (Expenses \$ including grants of \$) (Revenue \$)	
40		de:) (Expenses \$including grants of \$) (Revenue \$	
		er program services (Describe on Schedule O.)) (Payanua \$	_
		penses \$ including grants of \$ all program service expenses ► 1.661.250.) (Nevenue 2	_

Form 990 (2020) Deer Run Retreat Center Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
t	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
C	: Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
k	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F. Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х

Form 990 (2020) Deer Run Retreat Center Part IV Checklist of Required Schedules (continued)

			Yes	No
22	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	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a 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		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	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.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
i	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Х
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		Х
34	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	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b 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)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			1.0
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
BAA			1 990 ((2020)

Form 990 (2020) Deer Run Retreat Center

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

			Yes	No
	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 129			
ı	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
١	of If 'Yes,' enter the name of the foreign country ►			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5 a		X
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		- 1
		30		
	a 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?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	_		V
	services provided to the payor?	7 a		Х
	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Form 8282?	7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
١	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
I	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			
	Enter the amount of reserves on hand			
14	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ı	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
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		Х
10		16		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	10		A

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 9 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Χ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... X 15 a **b** Other officers or key employees of the organization...See .Schedule..Q..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a X **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Edward Winn 3845 Perkins Road Thompsons Station TN 37179 615 794-2918

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See 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.

		(C)								
(A) Name and title	(B) Average hours per	Position (do not check than one box, unless p is both an officer an director/trustee)		and a	ore on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other		
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) David Gibson	40									
President	0	Х		Χ				107,057.	0.	0.
	$-\frac{40}{0}$			Х				65,157.	0.	0.
(3) Edward Winn	10									
Controller	0			Χ				20,156.	0.	0.
(4) Ron Brown	1									
Trustee	0	Χ						0.	0.	0.
(5) Gabe Lyons	1									
Trustee	0	X						0.	0.	0.
_(6) Amy Fenton	1									
Trustee	0	X						0.	0.	0.
_(7)_Bill_Brown	1									
Trustee	0	Χ						0.	0.	0.
_(8)_Rick_West	1									
Trustee	0	Χ						0.	0.	0.
(9) Kurt Beasley	1									
Trustee	0	Χ						0.	0.	0.
(10) Brad Underwood	1									
Trustee	0	Χ						0.	0.	0.
(11) Richard Dunlap	1									
Trustee	0	Х						0.	0.	0.
(12) David Farmer	1	17						0	0	0
Trustee	0	Χ						0.	0.	0.
(13)										
(14)										

Part VII	Section A. Officers, Directors, Tru	1	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	oyees	(conti	inued)
		(B)			((•							
	(A) Name and title	Average hours per week	box	, unle cer ar	ess pe nd a d	erson direct	than is both or/trus	h an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	((F) ated amof other	
		(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	the o	nsation rganizat d related anization	tion d
(15)		illicy		Ö			red.						
(13)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1 b Sub	total							>	192,370.	0.			0.
	Il from continuation sheets to Part VII, Section (add lines 1b and 1c)							▶	0. 192,370.	0.			0.
2 Tota	I number of individuals (including but not limited							ved			ensatio	n	0.
from	the organization • 1											Yes	No
3 Did t	the organization list any former officer, direc ne 1a? <i>If 'Yes,' complete Schedule J for suc</i>	tor, truste	ee, ke	еу ег	mplo	oyee	e, or	high	nest compensated	employee	3	103	X
	any individual listed on line 1a, is the sum of organization and related organizations greate										. 3		Λ
such	any person listed on line 1a receive or accru							· · · ·			. 4		Х
for s	bervices rendered to the organization? If 'Yes B. Independent Contractors	s,' comple	te So	chea	lule	J fo	r suc	ch p	erson		. 5		Χ
1 Com	plete this table for your five highest compen-	sated ind	epen	dent	t cor	ntrad	ctors	tha	t received more the	nan \$100,000 of			
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) Name and business address Description of services Co							(Compe	C) ensatio	n				
	Hame and business address Colli												
	I number of independent contractors (including b		ited to	o the	se I	isted	d abo	ve)	L who received more	than			
\$100	0,000 of compensation from the organization	D 0											

		Check if Schedule O contains a response or note to a	ny line in this Part V	III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns				
ntril d Oi	_	Noncash contributions included in lines 1a-1f				
g an	h	Total. Add lines 1a-1f	1,115,889.			
Program Service Revenue	•	Business Code				
eve		Facility Rental 713990	200,119.	200,119.		
e B		Meals 713990	113,800.	113,800.		
ervic		Camp Activities 713990 Camp Store 713990	62,012. 61,574.	62,012. 61,574.		
n Se			01,374.	01,374.		
grar		Summer Camp 713990 All other program service revenue				
Pro	g	Total. Add lines 2a-2f	437,505.			
	3	Investment income (including dividends, interest, and other similar amounts)	19,412.	19,412.		
	5	Royalties				
		(i) Real (ii) Personal				
	6 a	Gross rents 6a				
	b	Less: rental expenses 6b				
		Rental income or (loss) 6c				
	d	Net rental income or (loss)	•			
	7 a Gross amount from (i) Securities (ii) Other					
		sales of assets other than inventory 7a 13,985.				
	b	Less: cost or other basis				
	_	and sales expenses 7b 5,396. Gain or (loss) 7c 8,589.				
		Net gain or (loss)	8,589.	8,589.		
•		Gross income from fundraising events	0,303.	0,303.		
Other Revenue	оа	(not including \$ of contributions reported on line 1c).				
¥.	h	See Part IV, line 18	+			
¥ħ.		Net income or (loss) from fundraising events	•			
0		Gross income from gaming activities. See Part IV, line 19				
	b	Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities	-			
		Gross sales of inventory, less				
		Less: cost of goods sold 10b				
	С	Net income or (loss) from sales of inventory				
sno *	11 a		8,223.	8,223.		
Miscellaneous Revenue	b	Other Income 713990 All other revenue	0,223.	0,223.		
	С					
SC Re	d	All other revenue				
Σ	е	Total. Add lines 11a-11d	8,223.			
	12	Total revenue. See instructions	1.589.618	473.729	0	0

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Form 990 (2020) Deer Run Retreat Center 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).

Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
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	192,370.	167,778.	10,141.	14,451.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	747,780.	666,479.	40,286.	41,015.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	35,925.	30,670.	3,789.	1,466.
9	Other employee benefits	57,202.	37,143.	16,686.	3,373.
10	Payroll taxes	74,196.	65,480.	3,987.	4,729.
11	Fees for services (nonemployees):	·			•
a	Management				
Ł	Legal				
C	: Accounting				
c	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	42,821.	32,837.	9,984.	
12	(A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	38,702.	34,781.	3,921.	
13	Office expenses	30,702.	31,701.	3,321.	
14	Information technology				
15	Royalties				
16	Occupancy	88,068.	83,214.	4,854.	
17	Travel	7,928.	557==51	7,928.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,		,	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	214,526.	202,219.	12,307.	
	Insurance	69,210.	43,229.	25,981.	
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	All Other Expense	117,130.	112,568.	372.	4,190.
	Food and Supplies	113,868.	108,566.	5,302.	
	Repairs and Maintenance	61,955.	61,955.		
C	Small Tools and Equipment	14,331.	14,331.		
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,876,012.	1,661,250.	145,538.	69,224.
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 ► ☐ if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response or note to	o any line	in this Part X				
					(A) Beginning of year		(B) End of year	
	1	Cash — non-interest-bearing			2,221,358.	1	762,985.	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net			23,500.	4	73,247.	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	ner officer I contribu	, director, tor, or 35%		5		
	6	Loans and other receivables from other disqualified p		<u> </u>				
	0	section 4958(f)(1)), and persons described in section				6		
	7	Notes and loans receivable, net		7				
Ø	8	Inventories for sale or use	L		8			
Assets	9	Prepaid expenses and deferred charges	-	20,183.	9			
As	_		1 1		20,103.			
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	7,678,473.				
	b	Less: accumulated depreciation	10 b	2,104,406.	4,096,855.	10 c	5,574,067.	
	11	Investments — publicly traded securities				11		
	12	Investments – other securities. See Part IV, line 11				12		
	13	Investments - program-related. See Part IV, line 11.				13		
	14	Intangible assets				14		
	15	Other assets. See Part IV, line 11	165,000.	15				
	16	Total assets. Add lines 1 through 15 (must equal line	33)		6,526,896.	16	6,410,299.	
	17	Accounts payable and accrued expenses	38,488.	17	27,328.			
	18	Grants payable		<u> </u>	282,970.	18 19	463,927.	
	19		d revenue					
	20	Tax-exempt bond liabilities		_		20		
lies	21	Escrow or custodial account liability. Complete Part		L		21		
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	utor. or 35	5%		22		
_	23	Secured mortgages and notes payable to unrelated the	nird partie	es		23		
	24	Unsecured notes and loans payable to unrelated third	d parties.			24		
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com				25		
	26	Total liabilities. Add lines 17 through 25			321,458.	26	491,255.	
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	e ►	X				
alai	27	Net assets without donor restrictions			4,752,566.	27	5,465,712.	
ä	28	Net assets with donor restrictions		<u></u>	1,452,872.	28	453,332.	
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here •					
ō	29	Capital stock or trust principal, or current funds			29			
ets	30	Paid-in or capital surplus, or land, building, or equipn	nent fund			30		
188	31	Retained earnings, endowment, accumulated income	, or other	funds		31		
it A	32	Total net assets or fund balances			6,205,438.	32	5,919,044.	
Ne	33	Total liabilities and net assets/fund balances			6,526,896.	33	6,410,299.	
RΔ	Δ		TEEA0111L	10/07/20	•		Form 990 (2020)	

Form **990** (2020)

	() Bool Rail Roclode Collect	1,001	. , 0			<u> </u>
Par	TXI 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)		1	, 58	9,6	518.
2	Total expenses (must equal Part IX, column (A), line 25)		1	, 87	6,0)12.
3	Revenue less expenses. Subtract line 2 from line 1			-28	6,3	394.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6	,20	5,4	138.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O).	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
_	column (B))	10	5	<u>, 91</u>	9,0)44.
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				,	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain					
	in Schedule O.					
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2 a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	ed on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
ŀ	Were the organization's financial statements audited by an independent accountant?		2	2b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ	ate				
	basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
(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?	, 	2	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single					
36	Audit Act and OMB Circular A-133?		5	За		X
ŀ	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	<u></u>	3	3 b		L
BAA	TEEA0112L 10/19/20		Fo	rm !	990 ((2020)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Deer Run Retreat Center 62-1725478 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	tion A. Public Support		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,		
Cale	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see in:	structions)			12	
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second	, third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	olic Support P	ercentage				
14	Public support percentage for 20	20 (line 6, colum	n (f), divided by I	ine 11, column (f))		%
15	Public support percentage from 2	2019 Schedule A,	Part II, line 14.				%
16a	33-1/3% support test—2020. If the and stop here. The organization	ne organization d qualifies as a pul	id not check the l blicly supported o	oox on line 13, and organization	d line 14 is 33-1/3	3% or more, check	this box ►
b	33-1/3% support test—2019. If th and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, ch	neck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts-	meets the facts-a	nd-circumstance	s test, check this b	pox and stop here	e. Explain in Part V	/I how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the facts-a	nd-circumstances	s test, check this b	box and stop here	e. Explain in Part V	/I how the
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see inst	tructions ►

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.)

Jec	tion A. Public Support						
	lar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any 'unusual grants.')	578,782.	3,042,886.	653,078.	705,527.	792,898.	5,773,171.
2	Gross receipts from admissions,	370,702.	3,042,000.	033,070.	703,327.	132,030.	3,773,171.
	merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose	2,169,143.	2,235,587.	2,116,347.	2,364,963.	437,505.	9,323,545.
3	Gross receipts from activities that are not an unrelated trade					•	
	or business under section 513.						0.
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on its behalf.						
5	The value of services or						0.
	facilities furnished by a governmental unit to the						
	organization without charge						0.
	Total. Add lines 1 through 5 Amounts included on lines 1,	2,747,925.	5,278,473.	2,769,425.	3,070,490.	1,230,403.	15,096,716.
/a	2, and 3 received from						
	disqualified persons	0.	0.	53,795.	0.	0.	53,795.
b	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13		0			0	
_	for the year	0.	0.	0. 53,795.	0.	0.	53,795.
	Public support. (Subtract line	0.	0.	33, 193.	0.	0.	33,793.
	7c from line 6.)						15,042,921.
	tion B. Total Support	4 > 0016	42.0017	() 0010	4 N 0010	4 > 0000	(0 T
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends,	2,747,925.	5,278,473.	2,769,425.	3,070,490.	1,230,403.	15,096,716.
	payments received on securities loans,						
		2,752.	7,118.	30,779.	38,282.	19,412.	98,343.
	payments received on securities loans, rents, royalties, and income from similar sources	2,752.	7,118.	30,779.	38,282.	19,412.	98,343.
	payments received on securities loans, rents, royalties, and income from similar sources	2,752.	7,118.	30,779.	38,282.	19,412.	98,343.
b	payments received on securities loans, rents, royalties, and income from similar sources	·	,			,	0.
b	payments received on securities loans, rents, royalties, and income from similar sources	2,752.	7,118.	30,779.	38,282.	19,412.	98,343. 0. 98,343.
b	payments received on securities loans, rents, royalties, and income from similar sources	·	,			,	0.
b c 11	payments received on securities loans, rents, royalties, and income from similar sources	·	,			,	0.
b c 11	payments received on securities loans, rents, royalties, and income from similar sources	·	,			,	0. 98,343.
b c 11	payments received on securities loans, rents, royalties, and income from similar sources	·	,			,	0. 98,343. 0.
b 11 12	payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,752.	7,118.	30,779.	38,282.	19,412.	0. 98,343. 0.
b 11 12	payments received on securities loans, rents, royalties, and income from similar sources	2,752.	7,118. 5,285,591.	30,779.	38,282.	19,412.	0. 98,343. 0.
b c 11 12 13 14	payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.)	2,752. 2,750,677. for the organization stop here	7,118. 5,285,591. on's first, second,	30,779. 2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 15,195,059.
b c 11 12 13 14 Sec	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop hereblic Support P	7,118. 5,285,591. on's first, second,	30,779. 2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 0. 15,195,059.
b c 11 12 13 14 Sec 15	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here	5,285,591. on's first, second, ercentage n (f), divided by li	30,779. 2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 0. 15,195,059. ▶ ☐
b c 11 12 13 14 Sec: 15 16	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here. blic Support P 020 (line 8, column 2019 Schedule A,	5,285,591. on's first, second, ercentage n (f), divided by li Part III, line 15.	30,779. 2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 0. 15,195,059.
b c 11 12 13 14 Sec 15 16 Sec	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here	5, 285, 591. on's first, second, ercentage n (f), divided by li Part III, line 15 me Percentage	30,779. 2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 0. 15,195,059.
b c 11 12 13 14 Sec 15 16 Sec 17	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here blic Support Pozo (line 8, column 2019 Schedule A, restment Incorror 2020 (line 10c,	5, 285, 591. on's first, second, Percentage in (f), divided by li in Part III, line 15. ine Percentage column (f), divided	30,779. 2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 0. 15,195,059.
b c 11 12 13 14 Sec 15 16 Sec 17 18	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here. 2019 Schedule A, restment Incorror 2020 (line 10c, from 2019 Schedule the organization of the	5, 285, 591. on's first, second, Percentage n (f), divided by li Part III, line 15 me Percentage column (f), divided le A, Part III, line lid not check the	30,779. 2,800,204. third, fourth, or f ne 13, column (f) ed by line 13, column box on line 14, ar	38,282. 3,108,772. ifth tax year as a umn (f))	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 15,195,059. 15,195,059. 99.00 % 99.08 % 0.65 % 0.55 % ad line 17
b c 11 12 13 14 Sec 15 16 Sec 17 18 19a	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here blic Support Population of the support Population of the support Population of the support Population of the organization of this box and stop	5,285,591. on's first, second, Percentage In (f), divided by li Part III, line 15. Ine Percentage Column (f), divided le A, Part III, line lid not check the lip here. The organ	2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a umn (f). d line 15 is more as a publicly supp	19,412. 1,249,815. section 501(c)(3)	0. 98,343. 0. 15,195,059. 15,195,059. 99.08 % 99.08 % 0.65 % 0.55 % ad line 17
b c 11 12 13 14 Sec 15 16 Sec 17 18 19a	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here blic Support Population of the second stop here and the organization of the organization o	5, 285, 591. on's first, second, rercentage n (f), divided by li Part III, line 15. me Percentage column (f), divide le A, Part III, line lid not check the le phere. The organ id not check a bo	2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a id line 15 is more as a publicly suppose 19a, and line 1	19, 412. 1,249, 815. section 501(c)(3)	0. 98,343. 0. 0. 15,195,059. 15,195,059. 99.08 % 99.08 % 0.65 % 0.55 % d line 17 1
b c 11 12 13 14 Sec 17 18 19a b	payments received on securities loans, rents, royalties, and income from similar sources	2,752. 2,750,677. for the organization stop here blic Support Population of the companization of the organization of th	5,285,591. on's first, second, ercentage on (f), divided by li Part III, line 15. me Percentage column (f), dividel le A, Part III, line lid not check the le phere. The organ id not check a bo and stop here. Th	2,800,204. third, fourth, or f	38,282. 3,108,772. ifth tax year as a umn (f). d line 15 is more as a publicly suppose 19a, and line 10alifies as a public.	19, 412. 1,249, 815. section 501(c)(3)	98,343. 0. 0. 15,195,059. 15,195,059. 99.00 % 99.08 % 0.65 % 0.55 % d line 17 1

Part IV Supporting Organizations

(Complete only if you checked a box in 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.)

Section A. All Supporting Organizations

			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.	1		
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).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
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.	3b		
С	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.	3с		
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.	4a		
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.	4b		
С	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.	4c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in 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.	9с		
l0a	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.	10a		
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.).	10b		

Pai	t IV	Supporting Organizations (continued)			
				Yes	No
		the organization accepted a gift or contribution from any of the following persons?			
č	the g	son who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, overning body of a supported organization?	11a		
ŀ	A fan	nily member of a person described in line 11a above?	11b		
		controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI .	11c		
Sec	tion I	B. Type I Supporting Organizations	-		
_	5:11			Yes	No
1	or mo office orgar than were	the governing body, members of the governing body, officers acting in their official capacity, or membership of one pore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ears, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported nization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers g the tax year.	1		
2	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion (C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
	or ea	ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion I	D. All Type III Supporting Organizations			
		217th Type in Supporting Significations		Yes	No
1	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				
			,		
	orgar	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	the o	nization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how</i> organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tin	ason of the relationship described in line 2, above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Sac		E. Type III Functionally Integrated Supporting Organizations	J		
500	don i	L. Type in Functionally integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
á	a 📙 T	he organization satisfied the Activities Test. Complete line 2 below.			
ŀ	ד 🗌 כ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
(: [] T	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	uctions	s).
2	Activi	ities Test. Answer lines 2a and 2b below.		Yes	No
á	suppo orgai	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted			
		tantially all of its activities.	2a		
ŀ	more reaso	the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the organization's position that its supported organization(s) would have engaged in these activities	2b		
2		or the organization's involvement. Int of Supported Organizations. Answer lines 3a and 3b below.	ZIJ		
		the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			
•		of the supported organizations? If 'Yes' or 'No,' provide details in Part VI.	3a		
ŀ		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

	/ Bool Run Rocloge Concol		00 1	10110
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on No	ov. 20, 1970 (explain in st complete Sections A	n Part VI). See through E.
Sec	tion 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		
Sec	tion 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):			
	Average monthly value of securities	1a		
	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		
Sec	tion C — Distributable Amount			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		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	egrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2020

62-1725478

9 Distributable amount for 2020 from Section C, line 6

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Section D — Distributions						
1	Amounts paid to supported organizations to accomplish exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3				
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5				
6	Other distributions (describe in Part VI). See instructions.	6				
7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8				

10 Line 8 amount divided by line 9 amount		10	
Ente d'antourit arriada by into 3 antourit	(i)	(ii)	(iii)
Section E — Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			
BAA		Schedule A (Fo	rm 990 or 990-EZ) 2020

BAA

Schedule A (Form 990 or 990-EZ) 2020

Part VI

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 D (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

Dee	r Run Retreat Center			62-17	25478	
Par	t Organizations Maintaining Don	or Advised Funds or Other	Similar Fu	nds or Accounts.		
	Complete if the organization ans	swered 'Yes' on Form 990, P	art IV, line	e 6.		
		(a) Donor advised fund	ds	(b) Funds and	d other accoun	nts
1	Total number at end of year					
2	Aggregate value of contributions to (during year). \ldots .					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and do are the organization's property, subject to the				Yes	No
6	Did the organization inform all grantees, done for charitable purposes and not for the benefit impermissible private benefit?	it of the donor or donor advisor, or	for any othe	r purpose conferring	Yes	No
Par						
	Complete if the organization ans			27.		
1	Purpose(s) of conservation easements held b	,	<u></u> ,,			
	Preservation of land for public use (for exam	pple, recreation or education)	<u></u>	ion of a historically in	•	irea
	Protection of natural habitat		Preservat	ion of a certified histo	ric structure	
_	Preservation of open space					
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation contribu	ition in the for	m of a conservation ea	sement on the	
	last day of the tax year.			Held at th	ne End of the T	ax Year
á	Total number of conservation easements					
ŀ	Total acreage restricted by conservation ease	ements		2b		
(Number of conservation easements on a cert	ified historic structure included in ([a)	2c		
	Number of conservation easements included	in (c) acquired after 7/25/06, and r	not on a histo	oric		
	structure listed in the National Register			2d		
3	Number of conservation easements modified, tratax year ►	nsferred, released, extinguished, or to	erminated by	the organization during	the	
4	Number of states where property subject to cons			<u>_</u>		
5	Does the organization have a written policy re				□ v	
_	and enforcement of the conservation easeme				Yes	No
6	Staff and volunteer hours devoted to monitoring,	inspecting, nandling of violations, an	a enforcing co	onservation easements	during the year	
7	Amount of expenses incurred in monitoring, insp ▶\$	ecting, handling of violations, and en	forcing conser	vation easements durin	ng the year	
8	Does each conservation easement reported cand section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requir	ements of se	ection 170(h)(4)(B)(i)	Yes	No
9	In Part XIII, describe how the organization re include, if applicable, the text of the footnote	ports conservation easements in it	s revenue an	d expense statement	and balance station's account	heet, and ting for
_	conservation easements.	aliana of Aut Historia IT		Othor Charles A		
Par	Organizations Maintaining Collection Complete if the organization ans	swered 'Yes' on Form 990, P	asures, or	e 8.	sets.	
1 a	If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII the text of the footnote to its financial	eld for public exhibition, education,	or research	tatement and balance in furtherance of publ	sheet works of ic service, prov	of art, vide in
ŀ	If the organization elected, as permitted unde historical treasures, or other similar assets held to following amounts relating to these items:	for public exhibition, education, or res	earch in furth	erance of public service	e, provide the	t,
	(i) Revenue included on Form 990, Part VIII					
	(ii) Assets included in Form 990, Part X \dots				·	
	If the organization received or held works of art, amounts required to be reported under FASB	ASC 958 relating to these items:				_
	Revenue included on Form 990, Part VIII, line	e 1			·	
	Accate included in Form 990 Part Y			•	C	

Part III Org	anizations Mainta	ining Colle	ections of Ar	t, Historic	al Treasures, or	Other	Similar Ass	ets (co	ontinu [,]	ed)
3 Using the ditems (che	organization's acquisitioneck all that apply):	n, accession, a	nd other records	, check any o	f the following that m	ake signif	icant use of its	collectio	n	
a Public	exhibition		d [Loan or e	xchange program					
<u> </u>	arly research		е [Other						
c Prese	rvation for future gener	rations		_						
Part XIII.	description of the organiz		·	,	· ·					
	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?									
	9, or reported an					swered	Yes on Fo	rm 990	J, Pari	t IV,
1 a Is the orga	anization an agent, tru 190, Part X?	stee, custodia	an or other inter	mediary for	contributions or othe	er assets	not included	Yes	Г	No
	plain the arrangement							□ .63		
	, .		,	J .				Amount		
c Beginning	balance					1 с				
d Additions	during the year					1 d				
	ns during the year									
-	lance									
	ganization include an a						-		L	No
b If 'Yes,' ex	xplain the arrangement	t in Part XIII.	Check here if the	ne explanation	on has been provide	d on Part	t XIII		· · · · · L	
Double Co.	l	\	11	12	I IV I -	000	D 1\ / 1:	10		
Part V End	lowment Funds. C	· ·	Ť							
1 a Reginning	of year balance	(a) Current	year (b)) Prior year	(c) Two years back	(a)	Three years back	(e) F	our years	3 Dack
	ons									
	ment earnings, gains,									
	scholarships									
	enditures for facilities									
	ams									
f Administra	ative expenses									
•	ar balance									
	e estimated percentag		ent year end bal	ance (line 1	g, column (a)) held	as:				
	gnated or quasi-endowm		%							
	endowment •		i							
c Term end		 %	1.1000/							
The percer	ntages on lines 2a, 2b, a	nd 2c should e	equal 100%.							
	endowment funds not in	the possessior	of the organizat	tion that are h	neld and administered	for the		Г	Vaa	N.
organizati	on by: ated organizations							3a(i)	Yes	No
• • •	ed organizations									
• •	line 3a(ii), are the rela									
	n Part XIII the intende	-		•				. 30		
	d, Buildings, and		_							
	nplete if the organ			on Form 9	90, Part IV, line	11a. S	ee Form 99	0, Par	t X, Iir	ne 10.
D	escription of property		(a) Cost or othe (investme	er basis nt)	(b) Cost or other basis (other)	(c) Ac	cumulated reciation	(d) E	Book va	lue
1 a Land					1,860,472.			1	,860,	472.
b Buildings.					4,441,588.	1,	101,444.		,340,	
c Leasehold	$improvements. \dots . \\$				728,717.		572,819.		155,	,898.
d Equipmen	t				148,220.		116,163.		32,	,057.
					499,476.		313,980.			496.
	1a through 1e. (Colun	nn (d) must e	qual Form 990,	Part X, colu	mn (B), line 10c.)				,574,	
RΔΔ							School	lule D (Fo	orm 990	A 2020

Schedule D (Form 990) 2020

BAA

Complete if the organization answere (a) Description of security or category (including name of security)	(b) Book value		ation: Cost or end-of-year market value
) Financial derivatives	` '	(0)	
2) Closely held equity interests			
3) Other			
	-		
A) B) C) D) E)			
<u>"</u>	-		
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<u>′</u>	_		
-)	-		
<u>3)</u>	_		
	_		
l)			
otal. (Column (b) must equal Form 990, Part X, column (B) line 12.)		27./2	
Part VIII Investments – Program Related. Complete if the organization answere	d 'Vas' on Form 991	N/A Deart IV line 11c	See Form 990 Part Y line 1
(a) Description of investment	(b) Book value	(c) Method of valuation	on: Cost or end-of-year market value
	(b) Dook value	(c) motilod of valuation	on Jose of Gra of year market value
(1)	+		
(2)	+		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
10)			
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.	N/A	Part IV line 11d	Soo Form 990 Part V Jino 15
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A), Part IV, line 11d.	See Form 990, Part X, line 15
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
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otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
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otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990 escription	O, Part IV, line 11d.	(b) Book value
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990 escription	O, Part IV, line 11d.	(b) Book value
Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) 10) Otal. (Column (b) must equal Form 990, Part X, column (b) must equal Form 990, Part X, column (complete if the organization answere) Other Assets. Complete if the organization answered 'Yes' on	N/A d 'Yes' on Form 990 escription (B) line 15.)	O, Part IV, line 11d.	(b) Book value
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Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Otal. (Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (1) Federal income taxes (2)	N/A d 'Yes' on Form 990 escription (B) line 15.)	O, Part IV, line 11d.	(b) Book value
Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Otal. (Column (b) must equal Form 990, Part X, column	N/A d 'Yes' on Form 990 escription (B) line 15.)	O, Part IV, line 11d.	(b) Book value
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Other Assets. Complete if the organization answere (a) D (b) Complete if the organization answere (a) D (c) Complete if the organization answere (b) D (d) Complete if the organization answere (c) Complete if the organization answere (c) Complete if the organization answere (c) Complete if the organization answered (c) Complete if	N/A d 'Yes' on Form 990 escription (B) line 15.)	O, Part IV, line 11d.	(b) Book value
Other Assets. Complete if the organization answere (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) 10) Otal. (Column (b) must equal Form 990, Part X, column Cart X Other Liabilities. Complete if the organization answered 'Yes' on (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (18) (19)	N/A d 'Yes' on Form 990 escription (B) line 15.)	O, Part IV, line 11d.	(b) Book value

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.					
1 Total revenue, gains, and other support per audited financial statements	1	1,589,618.			
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
a Net unrealized gains (losses) on investments					
b Donated services and use of facilities					
c Recoveries of prior year grants					
d Other (Describe in Part XIII.)					
e Add lines 2a through 2d.	2 e				
3 Subtract line 2e from line 1	3	1,589,618.			
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					
b Other (Describe in Part XIII.) 4b					
c Add lines 4a and 4b.	4 c				
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	1,589,618.			
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	n.			
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.					
Complete if the organization answered Tes of Form 350, Fart IV, line 12a.					
1 Total expenses and losses per audited financial statements	1	1,876,012.			
	1	1,876,012.			
1 Total expenses and losses per audited financial statements	1	1,876,012.			
 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 	1	1,876,012.			
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1	1,876,012.			
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities.	1	1,876,012.			
1 Total expenses and losses per audited financial statements 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	1 2 e	1,876,012.			
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities		1,876,012.			
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	2 e				
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. 4 a	2 e				
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. b Other (Describe in Part XIII.) 4 b 5 Other (Describe in Part XIII.) 4 b 6 Other (Describe in Part XIII.)	2 e 3				
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. b Other (Describe in Part XIII.) c Add lines 4a and 4b.	2 e 3 4 c	1,876,012.			
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. b Other (Describe in Part XIII.) 4 b 5 Other (Describe in Part XIII.) 4 b 6 Other (Describe in Part XIII.)	2 e 3				

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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

2020

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for the latest information.

Employer identification number

62-1725478

Form 990. Part III. Line 1 - Organization Mission

Deer Run Retreat Center

Our mission is to provide excellent camps and retreats which inspire a transformational relationship with Jesus Christ and strengthens relationships with family and friends. We exist to help kids and families grow through deeper faith, stronger relationships and greater adventure.

Form 990, Part VI, Line 11b - Form 990 Review Process

The president and lead accountant review the form 990 prior to filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization requires board members to disclose conflicts of interests as they arise. The organization avoids conducting business with board members.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Compensation is reviewed and approved by the board of directors annually.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Compensation is reviewed and approved by the board of directors annually.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Form 990 is available at the Giving Matters website. The public may make requests for the Form 990 and the other documents by contacting the organization.

2020	
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Federal Exempt Organization Tax Summary

Page 1

Deer Run Retreat Center

62-1725478

REVENUE	2020	2019	Diff
Contributions and grants Program service revenue Investment income Other revenue	1,115,889 437,505 28,001 8,223	523,965 2,364,963 38,282 162,608	591,924 -1,927,458 -10,281 -154,385
Total revenue	1,589,618	3,089,818	-1,500,200
EXPENSES Salaries, other compen., emp. benefits Other expenses	1,107,473 768,539	1,506,962 1,073,910	-399,489 -305,371
Total expenses	1,876,012	2,580,872	-704,860
NET ASSETS OR FUND BALANCES Revenue less expenses. Total assets at end of year. Total liabilities at end of year. Net assets/fund balances at end of year.	-286,394 6,410,299 491,255 5,919,044	508,946 6,526,896 321,458 6,205,438	-795,340 -116,597 169,797 -286,394

	2020	General Information	Page 1
Federal: 990, Sch A, Sch B, Sch D, Sch O Carryovers to 2021		Deer Run Retreat Center	62-1725478
Federal: 990, Sch A, Sch B, Sch D, Sch O Carryovers to 2021	Forms needed for this re	turn	
None	Carryovers to 2021		
	None		

)20	Federal Worksheets	Page 1
	Deer Run Retreat Center	62-172547
Form 990, Part III, Line 4e Program Services Totals		
	Program Services <u>Total Form 990</u> <u>Source</u>	
Total Expenses Grants Revenue	1,661,250. 1,661,250. Part IX, Line 25, 0. 0. Part IX, Lines 1-3 437,505. 437,505. Part VIII, Line 2,	, Col. B
Form 990, Part IX, Line 11g Other Fees For Services	(A) (B) (C) Program Management Services & General 42,821. 32,837. 9,984 Total \$ 42,821. \$ 32,837. \$ 9,984	(D) Fund- raising
Form 990, Part IX, Line 11g Other Fees For Services Schedule A, Part III, Line 7a Received From Disqualified Po	(A) (B) (C) Program Management Services & General 42,821. 32,837. 9,984 Total \$\frac{42,821.}{\$} \frac{32,837.}{\$} \frac{9,984}{\$} \frac{9,984}{\$}	(D) Fund- raising \$ 0.