Form **990**

Return of Organization Exempt From Income Tax

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

20**02**

Department of the Treasury Internal Revenue Service

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

Open to Public

	Α	For the 2002	c <u>alenda</u>	r year, or tax year beginning		, 200	2, and	d ending		, 20
	8 (Check if applicable	Please	C Name of organization					•	yer identification number
		Address change		Clear water Academy title					<u></u>	987746
		Name change	print or type		if mail is not delive	ered to street	addres	ss) Room/suite		one number
		instial return	See Specific	801 Drew Street				_ <u></u>		<u>)</u> 446-1722
		Final return	Instruc-	City or town state or country a	nd ZIP + 4	24/	•		F Accounti	ng method: 🗹 Cash 🔲 Accrual
		Amended return	tions.	Clearwater, Florida		<u>3755</u>				her (specify) >
		Application pend	ang ♦ Se	ection 501(c)(3) organizations and			table			to section 527 organizations
			ın	usts must attach a completed Sch	eduse A (Form 99	10 or 990-EZJ				n for affatates? ☐ Yes ☑ No
	<u>G</u>	Web site ▶						H(c) Are all affil		per of affiliates ▶
	j (Organization t	rpe (check	only one) ► 2 501(c) () ◄ (nsert no) 🔲 494	17(a)(1) or 🗀	527			L See instructions)
				organization's gross receipts are n	• • •			H(d) is this a ser	oarate retur	m Red by an
	•	organization nei	ed not file a	return with the IRS but if the organ	uzation received a	Form 990 Pac	kage	organization	covered b	oy a group ruling? 🔲 Yes 🗹 No
		in the mail it sh	ould file a r	etum without financial data. Some st	tates require a co	mplete return	L	I Enter 4 dx		
		Gross receipt	e Add line	es 6b 8b 9b and 10b to line 1	2 5 14	149777.				the organization is not required
				xpenses, and Changes in			Ralar			orm 990, 990-EZ, or 990-PF)
					-	-	Daiai	ices (See pa	ge i/ (or the mistructions j
				gifts, grants, and similar an	nounts receive	o 1a	1	264073		
			t public s	• •		1b		204011	-////	
0 4 2003			•	support	-	1c		10535	- /////	
				contributions (grants)	•			,	- ////// 1d	274608.
7				s 1a through 1c) (cash \$ e revenue including governme			- Do		2	1112594.
4				lues and assessments	ent lees and Co	NIB 2136 BIR	iii Fai	C VII, IIIIE 33)	3	
DEC (ľ.	•	vings and temporary cash in	vastmants				4	3014.
				Interest from securities	Vestilleries			•	5	
			rents	merese from securices		6a				
~		_	rental ex	oenses		6b				
SCANNED				ome or (loss) (subtract line 6	b from line 6a)	·			6c	
Ž		1		ent income (describe >)	7	
3	Ē	8a Gross	amount	from sales of assets other	(A) Securitie	s	(1	B) Other		=
2	Ş	1 .	nventory			8a				
35	_	b Less	cost or ot	her basis and sales expenses		8b			_/////	
		c Gain	or (loss)	(attach schedule)		8c				
		d Net g	ain or (los	ss) (combine line 8c, columns	(A) and (B))				8d	
		9 Speci	al events	s and activities (attach sched	dule)					
		a Gross	revenue	e (not including \$		of				
		1		reported on line 1a)		9a		16400	 //////	
				xpenses other than fundrais		9b		17769		(1369.)
		c Net ir	icome or	(loss) from special events (subtract line 9		9a)		9c	(1000.)
		10a Gross	sales of	doda sold ESERVINE	allowances	10a 10b				
		L			1			5110->	10c	
		c Gross	profit or i	(loss) from sales of inventory (at	racina scuednie) ((Sudtract line	HUD	rrom line 10a)	11	43161.
		12 Total	revenue	(add lines 1d, 2, 3, 4, 5, 66, 7	19c. 10c. a	and 11)			12	1432008.
	_			ces (Iran) ine 44, column (B	FO3T		-		13	1228770.
	9			and general (from the 4). Too					14	100374.
	Ê			rom line 44, column (D))	nungii (C)				15	
	Expenses			affiliates (attach schedule)					16	· · · · · · · · · · · · · · · · · · ·
	_			es (add lines 16 and 44, colu	ımn (A))				17	1488856.
	-S	1		ficit) for the year (subtract lir		12)			18	56 848.
	8			fund balances at beginning		•	umn f	(A))	19	1598355.
	Net Assets			s in net assets or fund balar					20	
	ž			und balances at end of year (20)		21	1565203.
										*

S

6	Other salaries and wages	20	101100	101100		
7	Pension plan contributions	27				· · · · · · · · · · · · · · · · · · ·
В	Other employee benefits	28				
9	Payroll taxes	29	57889.	56402.	1487.	
0	Professional fundraising fees	30				
1	Accounting fees	31				
2	Legal fees	32	56.			
3	Supplies	33	9392.			
4	Telephone	34	6632,			
5	Postage and shipping	35	12392.			
6	Occupancy .	36	29251.			
7	Equipment rental and maintenance	37	8677.			
8	Printing and publications	38				
9	Travel	39	15530.			
0	Conferences, conventions, and meetings	40	10662.		_	=
1	Interest	41	46720.			
2	Depreciation, depletion, etc. (attach schedule)	42	20400.			
3	Other expenses not covered above (itemize) a	43a				
b		43b	974323.			
C		43c				
d		43d				
e		43e	514533	471229.	43304 .	
4	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13—15	44	1488856.	1228770.	100374.	
ıi) tl	es enter (i) the aggregate amount of these joint cost the amount allocated to Management and general \$		and (iv) th	e amount allocated	to Fundraising \$	
	t III Statement of Program Service Acco					
Vha	t is the organization's primary exempt purpose?	▶				Program Service Expenses
f cl	rganizations must describe their exempt purpose a lents served publications issued, etc. Discuss ach nizations and 4947(a)(1) nonexempt charitable trusts	ievem	ents that are not n	neasurable (Section	n 501(c)(3) and (4)	(Required for 501(c)(3) and (4) orgs and 4947(a)(1)
_	To educate preschool through 12th grade chil					
	where the abilities of each child is enhanced					
•			T			
	(0	Grants	and allocations	\$)	1228770.
ь - Ь			•			
		-				
	(0	Grants	and allocations)	
	,			•••••••		
					•••••	{
	((Grants	and allocations	\$)	_
ď						
_						ļ
	, 4	•				ţ
	((Grants	and allocations	\$		<u> </u>
e (Other program services (attach schedule) (0	Grants	and allocations	\$)	
	Total of Program Service Expenses (should eq	ual lin	e 44, column (B),	Program services)	_	1228770
						Form 990 (2002

Part IV 1	Balance	Sheets	(See page	24 of th	ne instructions)	Ì
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N	lote	Where required attached schedules and amounts column should be for end of year amounts only	within the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing		923	45	19582.
	46	Savings and temporary cash investments		290356.	46	179981.
		,				
	47a	Accounts receivable	47a (81131.)			
	ь	Less allowance for doubtful accounts	47b 33560.	(26754)	47c	(27572.)
	48a	Pledges receivable	48a			
	ь	Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable .	Į.	2494.	49	10535.
	50	Receivables from officers, directors, truste	es, and key employees			
		(attach schedule)			50	
	51a	Other notes and loans receivable (attach				
ξ		schedule)	51a			
Assets	ь	Less allowance for doubtful accounts	51b		51c	
⋖	52	Inventories for sale or use		13858.	52	13858.
	53	Prepaid expenses and deferred charges		7425.	53	7425.
	54	Investments—securities (attach schedule)	► ☐ Cost ☐ FMV		54	
	55a	Investments—land, buildings, and				
	ļ	equipment basis	55a			
	b	Less accumulated depreciation (attach	1 1			
		schedule)	55b		55c	
	56	investments—other (attach schedule)			56	
	57a	Land, buildings, and equipment basis	57a			
	Ь	Less accumulated depreciation (attach				202.4722
		schedule)	[57b]	2235347	57c	2384792
	58	Other assets (describe ►)		58	
	ا	T. 1		2523649.		2579801.
	59	Total assets (add lines 45 through 58) (mus	st equal line 74)	262.	59 60	3149.
	60	Accounts payable and accrued expenses	•	¥99.	61	31751
	61	Grants payable	•	86751	+	125993.
۰,	62	Deferred revenue		00131		1203901
Labilities	63	Loans from officers, directors, trustees, an	d key employees (attach		63	
훒	١	schedule)	<u>, </u>		64a	
Ē		Tax-exempt bond liabilities (attach schedule	-	928274.		885526
	, b	Mortgages and other notes payable (attach	scnedule)	32027-4.	65	
	65	Other liabilities (describe	,		100	
	66	Total liabilities (add lines 60 through 65)	_	1015294.	66	1014398.
	Oras	anizations that follow SFAS 117, check here	and complete lines			
	Oiga	67 through 69 and lines 73 and 74	and complete mies			
8	67	Unrestricted			67	
ĕ	68	Temporarily restricted			68	
쿒	69	Permanently restricted .			69	
ᅙ		anizations that do not follow SFAS 117, chec	k here ▶ ☐ and			
Fund Balances	0.9.	complete lines 70 through 74				
ō	70	Capital stock, trust principal, or current fund	ds		70	
į	71	Paid-in or capital surplus, or land, building,		71		
Net Assets	72	Retained earnings, endowment, accumulate		72		
Ř	73	Total net assets or fund balances (add lin				
Š		70 through 72,	4		47054	
		column (A) must equal line 19, column (B) i	1608355.	73	1565203.	
	74	Total liabilities and net assets / fund balan	ices (add lines 66 and 73)	2523649.	74	2579691.

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

Par	t IV-A	Financia	liation of Reven I Statements wi See page 26 of t	th Revenue	per	Part	F	leconciliation of inancial Stater leturn	of Expenses nents with	s pe Exp	r Audited enses per
а	Total reve	nue, gains,	and other support			а	Total exp	penses and to	sses per		
_	•		statements >	a	MA WWW.			nancial statemen	=	a	AA NA
Ь	Amounts line 12, F		n line a but not on			ь		included on line , Form 990	a but not		
(1)	Net unrea on investr	lized gains nents	\$			(1)	Donated and use of				
(2)	Donated and use of	services of facilities	\$			(2)	Prior year ac reported or				
(3)		es of prior	•				Form 990	<u>\$</u>			
(4)	year gran Other (sp		<u>•</u>			(3)	Losses rep				
(4)	Outer (sp	ecily)				(4)	Other (spe				
			\$			("	-				
	Add amou	ints on line	s (1) through (4) ►	ь				<u> </u>			
								nts on lines (1) th	rough (4)>	þ.	
C	Line a mi		► t 12	C .		С	Line a min		.	c	
d		included of but not or				d		ncluded on line but not on line :			
(1)		expenses	.,			/n			••		
(')		ed on line				(1)	Investment not include	•			
	6b Form 9	990	\$				6b, Form 99	_			
(2)	Other (sp	ecify)				(2)	Other (spe	cify)			
			\$				••••				
	Add amor	unts on line	es (1) and (2)	d		1	Add amou	ints on lines (1)	and (2) >	d	
е			ne 12, Form 990			e		nses per line 17,	•		
	(line c plu			e			(line c plus	s line d)	> _	<u>l</u> e	
Par		it of Office instruction	ers, Directors, 1	frustees, ar	nd Key E	Emplo	yees (List e	each one even if	not compens	atec	t see page 26 of
	· ·		e and address		(B) Title a	nd avera	age hours per to position	(C) Compensation (If not paid, enter	(D) Contributions employee benefit p	ans #	(E) Expense account and other
	ela Chipn Starcrest	nan Drive #220			Executi	ve Dir	ector 40+	49160.	deferred comparis	8 9 (3)	allowances
	rwater, Fl						-				
Suzz	anne John			 -					 -		
	Weathers			•••••	Dean of	Admi	histraion	15423.			
Dun	edin, FL 3	4688					40+				
	····			••••	-						
		• • • • • • • • • • • • • • • • • • • •					-				
									<u> </u>		
		· · · · · · · · · · · · · · · · · · ·				 .				-	
						_		<u> </u>			
_									<u> </u>		
								l	l		l
75	organizatio	n and all re	or trustee, or key e lated organizations, edule—see page 2	of which mor	e than \$10	000 w				ur ▶	☐ Yes 🗹 No

Form	990 (2002)			_	Р	age 5		
Par	t VI Other Information (See page 27 of the instructions)				Yes	No		
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	d descri	otion of each activity	76		~		
77	Were any changes made in the organizing or governing documents but not repor	ted to	the IRS?	17	777777	√		
	If "Yes," attach a conformed copy of the changes							
	Did the organization have unrelated business gross income of \$1,000 or more during the year	ear cov	ered by this return?	78a		~		
	If "Yes," has it filed a tax return on Form 990-T for this year?		_	78b	_	•		
79	Was there a liquidation dissolution, termination, or substantial contraction during the year?			79				
BQa	Is the organization related (other than by association with a statewide or nationwide organization related to the statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide or nationwide organization related (other than by association with a statewide organization related (other than by association with a statewide organization related (other than by association related organization related (other than by association related organization related organization related (other than by association related organization related organization related organization related (other than by association related organization related organization related organization related (other than by association related organization re			80a		///////. •		
h	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexe. If "Yes," enter the name of the organization ▶	inpi o	ganizauoni					
		mpt o	nonexempt					
81a	Enter direct or indirect political expenditures. See line 81 instructions	81a						
	Did the organization file Form 1120-POL for this year?		•	81Ь		•		
82a	Did the organization receive donated services or the use of materials, equipment,	or fac	ilities at no charge			~		
	or at substantially less than fair rental value?		-	82a	umm	mm		
b	If "Yes," you may indicate the value of these items here. Do not include this amount	loor l	AM					
	as toroniae in trace is as as superior in trace in (ode incompanior in trace in)	82b		977				
	Did the organization comply with the public inspection requirements for returns and			83a 83b		\vdash		
	 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 4a Did the organization solicit any contributions or gifts that were not tax deductible? 							
	b If "Yes," did the organization include with every solicitation an express statement that such contributions							
	or gifts were not tax deductible?		Sucii Conu ibubons	84b				
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members	ers?		85a				
b	b Did the organization make only in-house lobbying expenditures of \$2,000 or less?					, , , , , , , , , , , , , , , , , , ,		
	If "Yes" was answered to either 85a or 85b do not complete 85c through 85h below unless the organization							
	received a waiver for proxy tax owed for the prior year	105-1	NA					
	Dues, assessments, and similar amounts from members .	85c 85d	NA NA					
	Section 162(e) lobbying and political expenditures Aggregate condeductible amount of section 6033(a)(1)(A) dues notices	85e	NA NA					
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	NA					
g	Does the organization elect to pay the section 6033(e) tax on the amount on line	8517		85g				
ĥ	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the		nt on line 85f to its	1		ł		
	reasonable estimate of dues allocable to nondeductible lobbying and political expendi	tures f	or the following tax			1		
	year? .	100.		85h				
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a 86b	NA NA					
	Gross receipts, included on line 12, for public use of club facilities	87a	NA NA					
87	501(c)(12) orgs 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)	87ь	NA					
88	At any time during the year, did the organization own a 50% or greater interest in	a taxa	ble corporation or					
	partnership, or an entity disregarded as separate from the organization und				1	•		
	301 7701-2 and 301 7701-3? If "Yes," complete Part IX			88				
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during section 4911 ▶, section 4912 ▶, section							
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 ex							
	during the year or did it become aware of an excess benefit transaction from a pr a statement explaining each transaction	ior yea	ar? If "Yes," attach	89Ь				
c	Enter Amount of tax imposed on the organization managers or disqualified person	s durii	ng the year under			•		
-	sections 4912, 4955, and 4958 Enter Amount of tax on line 89c, above, reimbursed by the organization		<u> </u>			<u>0</u>		
	▶ _							
	List the states with which a copy of this return is filed ▶					******		
91	The books are in care of Clearwater Academy International	relepho	one no ▶ (727) 4	46-17	22			
		IP + 4		755				
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 10	41— 0			. 1	▶ □		
	enter the amount of tax-exempt interest received or accrued during the tax year 92 NA							

Part	Analysis of Income-Producing	Activities (See pag	ge 31 of the i	instructio	ns)		
Note.	Enter gross amounts unless otherwise	Unrelated bus	sinėss income	Excluded b	y section	on 512 513 or 514	(E)
ındıca	•	(A)	(B)	(C)	^{-}T	(D)	Related or exempt function
93 (Program service revenue	Business code	Amount	Exclusion of	code	Amount	income
а.	Tuitier & Motural fees				$\neg \neg$		1112594.
ь.							
C.							
				 	-+		
d.		— 		 	-+		<u> </u>
е.				 			
	Medicare/Medicaid payments	···-		 	\dashv		 -
_	ees and contracts from government agenci	es		 	\rightarrow		<u> </u>
94 1	Membership dues and assessments		·····	 	_		
	nterest on savings and temporary cash investmen	nts		-	-+		3014
96 (Dividends and interest from securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
97	Net rental income or (loss) from real estate						
a	debt-financed property						<u> </u>
b r	not debt-financed property	<u> </u>					
	let rental income or (loss) from personal proper	tv L. L					
	Other investment income	,					
	Gain or (loss) from sales of assets other than invente	nrv i		<u> </u>	\neg		
	Net income or (loss) from special events	",			一十		(1369.)
	Gross profit or (loss) from sales of inventory			 	一		(1220.7
	Other revenue a Educational Materials	' 			\dashv		30995.
	Students Transportaion			 			764.
	Commissions & Misc.	— 	-		\dashv		704.
	Lunch Program	— 		+	\dashv		11002
				! -	┵		
٠.	Contract Insurance				mal-		400.
	Subtotal (add columns (B), (D), and (E))						1157400.
	Total (add line 104, columns (B), (D), and (E					-	1157400.
	une 105 plus line 1d, Part I, should equal ti						
Part \							
Line N					ed imp	portantly to the a	ccomplishment
<u> </u>	of the organization s exempt purposes (o	ther than by providing	funds for such p	ourposes)			
	See Statement 3						
						_	
Part I	X Information Regarding Taxable Sub	osidiaries and Disre	garded Entitle	es (See pa	age 3	32 of the instru	ctions)
	(A)	(B)	(C)		-1 T	(D)	(E)
	Name address and EIN of corporation partnership, or disregarded entity	Percentage of ownership interest	Nature of ac	ctivities		Total income	End-of-year assets
	paratoromy, or alsragarood criacy	%			\dashv	··	033613
	· · · · · · · · · · · · · · · · · · ·	%			-+		
					\dashv		
		%					<u> </u>
D	Information Departure Transfers Ass	%	al Barati Carl	1		22 of the	l l
Part :	Information Regarding Transfers Ass	ociated with Person	ai benent Con	macrs (Se	e pag	ge 33 of the his	ructions)
	Ad the organization, during the year, receive any funds,						Yes No
(D) (Did the organization, during the year, pay pi	remiums, directly of i	indirectly, on a	personal	bene	ent contract?	L Yes L No
MOLE	If "Yes" to (b), file Form 8870 and Form						
	Under penatoes of perjury I declare that I have exa and belief it is true correct, and complete Declar	mmed this return, including about of preparer (other th:	g accompanying sc an officer) is based	thedules and Lon all infon	i statei mailor	ments and to the t of which preparer	est of my knowledge has any knowledge
Please		acon or preparer tourer an	un unca) is casea			11/11/1	1 2
Sign						11776	<u> </u>
Here	Signature of officer	-			Dá	te	
. 1016	Deborah Thranert, Finance Directo	<u> </u>					
	Type or print name and title						
Dove	Preparer s		Date	Check if		Preparer's SSN or	PTIN (See Gen Inst. W)
Paid Dannara	signature		I	setf- employed	▶ [
Preparer	r Firm S name for vours k				IN	•	
Use Only	if self employed) address and ZIP + 4		-			no > ()	
				<u>.</u>			

SCHEDULE A (Form 990 of 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

2002

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization Employer identification number 59 · 2987746 Clearwater Academy International Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions List each one If there are none, enter "None") (d) Contributions to (e) Expense (b) Title and average hours (a) Name and address of each employee paid more (c) Compensation employée benefit plans & deferred compensation account and other allowances than \$50 000 per week devoted to position Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation (b) Type of service Total number of others receiving over \$50 000 for professional services

Sche	dule /	A (Form 990 or 990-EZ) 2002		P	age 2		
Pa	rt II	Statements About Activities (See page 2 of the instructions)		Yes	No		
1	atte or	ring the year has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes" enter the total expenses paid incurred in connection with the lobbying activities \$	1		•		
	org	panizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other panizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.					
2	sut wit	ring the year, has the organization either directly or indirectly, engaged in any of the following acts with any ostantial contributors, trustees, directors officers, creators, key employees or members of their families or high any taxable organization with which any such person is affiliated as an officer director trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)					
a	Sal	e, exchange, or leasing of property?	2a		~		
b	Ler	nding of money or other extension of credit?	2b				
c	Fu	mishing of goods, services, or facilities?	2c		_		
đ	Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1 000)? See Fort V Form 990	2d	•			
e	Tra	insfer of any part of its income or assets?	2e		-		
					~		
3		es the organization make grants for scholarships fellowships student loans, etc ? (See Note below)	3				
4 Not		you have a section 403(b) annuity plan for your employees? tach a statement to explain how the organization determines that individuals or organizations receiving grants	4				
		from it in furtherance of its charitable programs qualify" to receive payments.					
Pa	rt I\	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)				
The	orga	inization is not a private foundation because it is (Please check only ONE applicable box)					
5		A church, convention of churches or association of churches Section 170(b)(1)(A)(i)					
6 7		A school Section 170(b)(1)(A)(ii) (Also complete Part V) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)					
8		A Federal state or local government or governmental unit Section 170(b)(1)(A)(v)					
9		A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital state ▶	spital's	name	, city,		
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. See (Also complete the Support Schedule in Part IV-A.)	tion 17	D(b)(1)(A)(IV)		
11a		An organization that normally receives a substantial part of its support from a governmental unit or from Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	the ger	eral p	ublic		
11b 12		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A) An organization that normally receives (1) more than 33½% of its support from contributions membersh receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no mits support from gross investment income and unrelated business taxable income (less section 511 tax) from to by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part	ore tha	n 337	.‰ of		
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and support described in (1) lines 5 through 12 above or (2) section 501(c)(4), (5), or (6) if they meet the test of section section 509(a)(3))						
		Provide the following information about the supported organizations. (See page 5 of the instruction	s)				
		(a) Namelsi of Supported Organizationisi	numb m abov				
14		An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instru	ctions \				
• •	<u> </u>	var endermentation ordinated and obertated to rear for baptic safety. Section 2021(9):4) (See bade 2 of the fuzion	-uoi13)				

	 You may use the worksheet in the instructions 						ccounting	3
	ndar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 199		(e) Tota	 al
15	Gifts, grants, and contributions received. (Do			 				
	not include unusual grants. See line 28)							
16	Membership fees received				 			
17	Gross receipts from admissions, merchandise			 	 	\dashv	·	
••	sold or services performed or furnishing of							
	facilities in any activity that is related to the organization's chantable etc. purpose			<u> </u>				
•••	<u> </u>			 	 		 -	
18	Gross income from interest, dividends amounts received from payments on securities							
	loans (section 512(a)(5)) rents, royalties and				l	l		
	unrelated business taxable income (less				ŀ			
	section 511 taxes) from businesses acquired				ľ			
	by the organization after June 30 1975			 	 			
19	Net income from unrelated business				Ì	İ		
	activities not included in line 18			 				
20	Tax revenues levied for the organization's				1	1		
	benefit and either paid to it or expended on			1		- 1		
	its behalf				ļ			
21	The value of services or facilities furnished to							
	the organization by a governmental unit without charge. Do not include the value of			1	1			
	services or facilities generally furnished to the			Ì	}	1		
	public without charge				<u> </u>			
22	Other income Attach a schedule Do not		j		ł			
	include gain or (loss) from sale of capital assets				ļ		<u>. </u>	
23	Total of lines 15 through 22							
24	Line 23 minus line 17							,,,,,,,,,,
25	Enter 1% of line 23	<u> </u>	<u> </u>		<u> </u>			
26	Organizations described on lines 10 or 11	a Enter 2% of	amount in colui	mn (e) line 24	•	26a		NA
ь	Prepare a list for your records to show the nar		t contributed by	v each person (oth	ner than a			
•	governmental unit or publicly supported organiz							
	amount shown in line 26a. Do not file this list w					26b		NA
C	Total support for section 509(a)(1) test. Enter li				•	26c		NA
					▶	26đ		NA
e	Public support (line 26c minus line 26d total)					26e		NA
f	Public support percentage (line 26e (numera	tor) divided by	ine 26c (denon	nınator))	•	26f	NA	%
 27	Organizations described on line 12 a Fo	or amounts includ	ted in lines 15.	16 and 17 that	were receive	d fron	n a "dısqu	alified
	person," prepare a list for your records to show	the name of, and	total amounts re	eceived in each ye	ar from, eac	h disq	jualified pe	rson "
	Do not file this list with your return. Enter th	e sum of such ar	mounts for each	ı year				
	(2001)(2000)		(1999)		(1998)			
ь	For any amount included in line 17 that was recei							
_	show the name of and amount received for each	year, that was mo	ere than the large	er of (1) the amoun	t on line 25 fo	or the y	rear or (2) \$	5 000
	(Include in the list organizations described in lines	5 through 11 as v	vell as individuals	s) Do not file this	ist with your	return	After com	puting
	the difference between the amount received and amounts) for each year	the larger amoun	t described in (1	i) or (2), enter the	sum or miese	untere	aices (uie i	exces:
	(2001)(2000)		(1999)		(1998)			
	(2001)		(1550)		(1000) .			•••
c	Add Amounts from column (e) for lines 15		16					
L	17 20				•	27c		NA
d		and line 27b tota			•	27d		NA
ū	Public support (line 27c total minus line 27d to		<u> </u>	 	•	27e		NA
	Total support for section 509(a)(2) test. Enter a		23 column (e)	▶ 27f	•			
9	Public support percentage (line 27e (numero					279		NA %
h	Investment income percentage (line 18, coli				-	27h		NA %
_	Unusual Grants For an organization describe							

Part V	•	Private School Questionnaire (See page 7 of the instructions)
		(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter bylaws other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues, and other written communications with the public dealing with student admissions programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No " please explain (If you need more space attach a separate statement) i.egal notice placed in local county newspaper	31		
	······································			
32	Does the organization maintain the following			
a	Does the organization maintain the following Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	unnin	,,,,,,,
b		32b		~
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs and scholarships?	32c	ζ.	
đ	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	V	******
	If you answered "No" to any of the above please explain (If you need more space attach a separate statement) At this time we do not offer any scholarships or other financial assistance			
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	33a		_
Ь	Admissions policies?	33Ь		*
С	Employment of faculty or administrative staff?	33c		
đ	Scholarships or other financial assistance?	33d		_
e	Educational policies?	33e		_
f	Use of facilities?	33f		
g	Athletic programs?	33 g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above please explain (If you need more space, attach a separate statement)			
	· · · · · · · · · · · · · · · · · · ·			
	··· ····· ··· ··· ··· ··· ··· ··· ···			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		_
ь	Has the organization's right to such aid ever been revoked or suspended?	34b	,,,,	<i>V</i>
	If you answered "Yes" to either 34a or bi please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." attach an explanation	35	•	

Cohertide.	A (Form	യവസ	990.F7	2002

Page 5

Pa	t VI-A Lobbying Expenditures by Ele (To be completed ONLY by an				e instructions)			
Chec	k ▶ a ☐ if the organization belongs to an affilia				nd "limited control"	provisions apply		
	Limits on Lobbyii (The term "expenditures" meal	•			(a) Affidated group totals	(b) To be completed for ALL electing organizations		
36	Total lobbying expenditures to influence public			36	NA			
37	Total lobbying expenditures to influence a legis		- •	37				
38	Total lobbying expenditures (add lines 36 and 3	•		38		<u> </u>		
39	Other exempt purpose expenditures							
40	Total exempt purpose expenditures (add lines :	38 and 39)		40				
41	Lobbying nontaxable amount. Enter the amount	t from the follow:	ng table—					
	If the amount on line 40 is The lot	bying nontaxab	le amount is—					
		the amount on li		1 /////				
		00 plus 15% of the						
		00 plus 10% of the		1 //////				
		00 plus 5% of the e	excess over \$1,50	0,000				
	Over \$17,000,000 \$1,000			42				
42	Grassroots nontaxable amount (enter 25% of li	•	- 00	43	 			
43	Subtract line 42 from line 36 Enter -0- if line 4			44	 			
44	Subtract line 41 from line 38 Enter -0- if line 4	i is more than in	e 38	<i>iiiii</i>				
	Caution If there is an amount on either line 43	or line 44, you n	nust file Form 47.	20				
	(Some organizations that made a section See the instructions for	on 501(h) election do not have to complete all of the five columns below for lines 45 through 50 on page 11 of the instructions) Lobbying Expenditures During 4-Year Averaging Period						
					1 :-			
	Calendar year (or fiscal year beginning in) ▶	(a) 2002	(Б) 2001	(c) 2000	(d) 1999	(e) Total		
	iscal year beginning in >	2002	2001	2000	1000	100.		
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures			<u>-</u>				
48	Grassroots nontaxable amount					}		
49	Grassroots ceiling amount (150% of line 48(e))							
50	Grassroots lobbying expenditures							
Pa	rt VI-B Lobbying Activity by Nonelec (For reporting only by organiza			Part VI-A) (See	page 11 of th	e instructions)		
	ng the year, did the organization attempt to infli mpt to influence public opinion on a legislative n				any Yes No	Amount		
8	Volunteers				 			
b	Paid staff or management (Include compensati	c (nrough h)						
С	Media advertisements .				 	 		
_4					1 1			
đ	Mailings to members, legislators, or the public	ante				 		
е	Mailings to members, legislators, or the public Publications, or published or broadcast statem							
e f	Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp	oses	or a legislative h	odv				
e f g	Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp Direct contact with legislators their staffs government	oses emment officials,	_	_				
e f	Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp Direct contact with legislators their staffs gove	oses emment officials, speeches lectu	_	_		0		

Sche	ctude A	(Farm 990 or 990-EZ)	2002				Dov	эe €	
	rt VI	Information	n Regarding Tra	ensfers To and Transaction e page 12 of the instruction	ns and Relationships With No.	ncharitab		<u> </u>	
51		Did the reporting organization directly or indirectly engage in any of the following with any other organization described 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							
а				to a nonchantable exempt orga			Yes	No	
Ū		Cash	orang organization	w a noncommon and ip: orga	THE GOTT OF	51a(i)		~	
		Other assets			•	a(ii)		1	
ь		er transactions		•				_	
_			es of assets with a	noncharitable exempt organizat	ion	b(i)		•	
			_	itable exempt organization	•	b(ii)		~	
			equipment, or oth	· •	•	P(iti)		~	
		Reimbursement a	• •			b(iv)		7	
		Loans or loan gua				b(v)		<u>~</u>	
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations		b(vi)		✓	
C				sts other assets or paid employ	yees .	С	L	<u>~</u>	
	goo	ds other assets or	services given by th	e reporting organization. If the org	Column (b) should always show the fair panization received less than fair marke s other assets, or services received	market valu t value in an	ie of th	е	
	(a) e no	(b) Amount involved	Name of nonc	(c) charitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements				
				·					
			<u> </u>						
_									
				· · · · · · · · · · · · · · · · · · ·					
			ļ						
			ļ <u>.</u>						
52a				affiliated with, or related to, on other than section 501(c)(3)) or a	e or more tax-exempt organizations n section 527?	☐ Yes	□	No	
<u>ь</u>	if "\	•	following schedule	,					
(a) Name of organization			zation	(b) Type of organization	(c) Description of relation	ship			
									
		 .	•						
				ļ					
		 .							
			<u>-</u>						
				 					
						· · · ·			

Form 990	Special	Statement 1				
Description of Event	Gross Receipts	Contribut Included	Gross Revenue	Direct Exper		Net Income
Various	16400		16400	17769		(1369)
				Stater	nent	2
Description	(A) Total	(B) Program Services	(C) Managen and Gene		(D) Fundi	raising
License fees & Memberships	124175	124175				
Advertising & Promotion Bank charges &	39113	39113				
Credit card	22445		22445	5		
Bookstore Materials	24743	24743				
Commissions	8521	8521				
Contract services	32031	32031				
Curriculum	7595	7595				
Enhancement Field trips & Graduation	175845	175845				
Insurance	20859		20859)		
Grounds Maintenance						
& Repairs	29402	29402				
County taxes	94	94				
Unemployment taxes Uniforms	1840	1840				
Lunch Program Donations	13973	13973				
Gifts	137	137				
Dues & Memberships	2383	2383				
Athletic Expense	2177	2177				
Equipment	9200	9200				
Total to FM 990, In 43	514533	471229	43304	<u> </u>		
Clearwater Academy Inte	ernational	.	_		Sta	tement 1,

Clearwater	Academy International 59-298774	59-2987746		
Form 990	Part VIII – Relationship of Activities to Statement Accomplishment of Exempt Purposes	3		
Line	Explanation of Relationship of Activities			
93A	Primary source of income for school, delivering education to students			
95	Interest on emergency funds			
101	Various events for students, fundraiser items, etc			
103a	Educational materials for students			
103b	Students transportation			
103c	Various programs for students, school pictures			
103d	Lunch program for students			
103e	Program to help parents if they are unable to fulfill contract			

Clearwater Academy International

Statement 3