Form **990**

Return of Organization Exempt from Income Tax

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

OMB No* 1545-0047 x

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For t	the 2004 calen	dar year,	or tax year beginning	, 2004,	and e	ending		,	
В	Check	r if applicable	D Employer Id	lentification Number						
	□ A	ddress change	59-23	<u> 59510</u>						
	Name change or print 1831 DREW STREET								number	
	Initial return See CLEARWATER, FL 33765								447-6385	
	Final return instruc-							F Accounting	X Cash	Accrual
	□▲	mended return							specify)	
		application pending	Section	on 501(c)(3) organizations and able trusts must attach a con	d 4947(a)(1) nonexempt		H and I are not appli	cable to section 5	27 organizations	
			charit (Form	able trusts must attach a con 1 990 or 990-EZ).	pleted Schedule A		H (a) Is this a grou	up return for affilia	tes² Yes	X No
G	Wah	site: ► N/A	(, 0,,,	. 556 6. 556 == //.		İ	H (b) If 'Yes,' ente	r number of affilia	tes ►	
							H (C) Are all affilia	ates included?	Yes	No
J		anization type ck only one)	▶	X 501(c) 3 ◀ (insert n	o.) 4947(a)(1) or	527	(If 'No,' atta H (d) Is this a sep	ch a list. See instr	•	
K				nization's gross receipts are n				covered by a grou		X No
	\$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data.									A NO
	Canara atataga na matura a na mailata matura a							zation is not require		
	Gross	s receints: Add	lines 6h 8	b, 9b, and 10b to line 12	1 103 869				190, 990-EZ, or 990-P	
	GIOS.			ses, and Changes in Ne		Balan				
ח	1			ants, and similar amounts rece			(
Ö	а	Direct public				1a	38	,589.		
2		Indirect public	• •			15	4			
S		Government of				10				
SCANNED	d	Total (add lines 1a through 1c) (ca	sh \$	38,589. noncash	\$	<u></u>		1d	38,	589.
U	2	Program serv	ice reven	ue including government fees	and contracts (from Par	rt VII,	line 93)	. 2	1,050,	049.
==	3	Membership of	dues and	assessments				3		
	4	Interest on sa	avings and	I temporary cash investments				4	14,	<u>, 231 .</u>
2	5	Dividends and	d interest	from securities				5		
	6a	Gross rents.				<u>6a</u>				
\simeq		Less: rental e	•			_6b	<u> </u>	6c		
4 2005 *****	c Net rental income or (loss) (subtract line 6b from line 6a).									
R	7	Other investm	nent incor	ne (describe	(A) Converting	T	(B) Other) 7		
Ž E	8a			es of assets other	(A) Securities	-	(B) Othe			
Ŋ		than inventor	•			8 a		,000.		
E				is and sales expenses le)Statement1		80		,000.		
				bine line 8c, columns (A) and	(R))	1 80	<u> </u>	, 000 . 8d	1	,000.
	9	• •	, ,	ivities (attach schedule). If an	• • • •	on ch	eck here. ▶	. 🗆	±,	, 000.
	-	Gross revenu			of contributions	. g, c	con nora			
	_	reported on li	•	· · · · · · · · · · · · · · · · · · ·		9 a	d			
	ь	•	-	other than fundraising expense		9 b				
								9с		
	10 a	Gross sales o	半層の	special events (subtract ling), loss reuring and allowance	\$	10a	n			
		Less: cost of				10 b			į	
	c			les of inventory (attach schedule) (sul	otract line 10b from line 10a).			10c		
	11			a ti √41,013 e 1 þg i				11		
	12			s 1d, 2, 3, 4, 5, 5c, 7, 8d, 9c,	10c, and 11)			12	1,103,	
E	13							13	1,095,	
EXPEZSES	14	_	-	ral (from line 44, column (C))				14		<u>,500.</u>
E N	15	· ·		44, column (D))				. 15	8,	<u>,590.</u>
5 E	16			•				16	1 100	000
	17				1			17	1,106,	
. A	18	•		he year (subtract line 17 from	•			18		, 033.
NET	19			ances at beginning of year (fro				19	994,	<u>,679.</u>
T T	20 21	_		ssets or fund balances (attach inces at end of year (combine	·			20	001	646.
-	41	INCL ASSELS OF	iuiiu bala	inces at enu or year (combine	mics 10, 13, and 20)			41	」 フブエ,	, 030.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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

D	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising			
22	Grants and allocations (att sch)				电线 接触				
	(cash \$								
	non-cash \$)	22							
23 24	Specific assistance to individuals (att sch) Benefits paid to or for members (att sch)	23			静 【 學 程 _ 理				
25	Compensation of officers, directors, etc.	25	144,879.	144,879.					
26	Other salaries and wages.	26	402,087.	402,087.					
27	Pension plan contributions .	27							
28	Other employee benefits.	28							
29	Payroli taxes	29	42,015.	42,015.					
30	Professional fundraising fees	30							
31	Accounting fees.	31	600.		600.				
32	Legal fees .	32	1,900.	5 540	1,900.				
33	Supplies	33	5,542.	5,542.					
34	Telephone	34	8,291.	8,291.					
35	Postage and shipping	35	27,293.	27,293.					
36 37	Occupancy . Equipment rental and maintenance	36 37							
38	Printing and publications	38	13,285.	13,285.					
39	Travel	39	13,203.	15,205.					
40	Conferences, conventions, and meetings	40	9,569.	9,569.					
41	Interest	41	30,187.	30,187.					
42	Depreciation, depletion, etc (attach schedule)	42	54,522.	54,522.					
	Other expenses not covered above (itemize):	<u> </u>							
	See Statement 2	43a	366,732.	358,142.		8,590.			
b		43b							
c		43 c							
d		43 d							
е		43e							
44	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15.	44	1,106,902.	1,095,812.	2,500.	8 <u>,59</u> 0.			
Joint	Costs. Check I if you are following	SOP 9	98-2						
	any joint costs from a combined education					► Yes X No			
	es,' enter (i) the aggregate amount of thes			; (ii) the a	mount allocated to Prog	ram services			
\$_	; (iii) the amount all indraising \$	located	to Management and ge	eneral \$; and (iv) th	e amount allocated			
	Statement of Program Serv	ice A	ccomplishments						
What	is the organization's primary exempt pur					Program Service Expenses			
All or	rganizations must describe their exempt particular served, publications issued, etc. Discusons and 4947(a)(1) nonexempt charitable	ourpose ss achi trusts	e achievements in a clear evements that are not m must also enter the amo	ar and concise manner. neasurable. (Section 50) punt of grants & allocation	State the number of (c)(3) & (4) organons to others.)	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)			
а	PRIMARY AND SECONDARY EDU	CATI	ON SERVICE OUTP	UT- STUDENTS ED	UCATED 135				
			(Grants and	allocations \$		1,095,812.			
b									
	(Grants and allocations \$)								
•									
(Grants and allocations \$									
d	d								
				allocations \$)				
	Other program services		<u>`</u>	allocations \$)	1 005 010			
f	Total of Program Service Expenses (she	ouid ed	uai iine 44, column (B),	rogram services)	-	1,095,812.			

Balance Sheets (See Instructions)

Note:	Wh	nere required, attached schedules and amounts within umn should be for end-of-year amounts only.	n the des	cription	(A) Beginning o	f year		(B) End of year
	45	Cash - non-interest-bearing			43	,547.	45	61,126.
	46	Savings and temporary cash investments			534	,469.	46	481,094.
	47 a	Accounts receivable	47a					
		Less: allowance for doubtful accounts	47b				47 c	
	48 a	Pledges receivable	48a					
		Less: allowance for doubtful accounts	48b				48 c	
		Grants receivable.					49	
A		Receivables from officers, directors, trustees, and k				····		
A S E T S	51 a	employees (attach schedule)	51a				50	
ַ דַ		Less: allowance for doubtful accounts	51 b	-			51 c	
٠,					10	,996.	52	8,324.
	53	Descriptions and defended description		ļ.		, ,,,,,,	53	0,324.
		Investments – securities (attach schedule)		☐ Cost ☐ FMV			54	· · · · · · · · · · · · · · · · · · ·
- 1		Investments – land, buildings, & equipment, basis			<u></u>			
		Less: accumulated depreciation					55	
		(attach schedule)	55 b				55 c 56	
		Investments – other (attach schedule).	57a	1,287,951.			20	
1		Land, buildings, and equipment: basis	5/a	1,207,951.			a a sawago	
	0	Less: accumulated depreciation (attach schedule)	57b	448,032.	820	<u>, 437.</u>	57 c	839,919.
1	58	Other assets (describe > See Statement 4)[,628.	58	3,984.	
	59	Total assets (add lines 45 through 58) (must equal	lıne 74)		1,413	,077.	59	1,394,447.
ŀ	60	Accounts payable and accrued expenses				830.	60	5,018.
ㅏ	61	Grants payable		[61	
L-AB-L-T-ES	62	Deferred revenue					62	
ĬΙ	63	Loans from officers, directors, trustees, and key employees (attack				·····	63	
Ī		Tax-exempt bond liabilities (attach schedule)					64a	
E		Mortgages and other notes payable (attach schedule)				<u>, 924.</u>	64b	383,712.
S		Other liabilities (describe >. See Statement				,644.	65	14,071.
_		Total liabilities (add lines 60 through 65)			418	,398.	66	402,801.
N E	rgan	izations that follow SFAS 117, check here ► at through 69 and lines 73 and 74.	nd comple	ete lines 67				
1	67	11 1 1 1					67	
ANGETS	68	Tananana banasahari					67	
Ĕ	69	Permanently restricted Permanently restricted	•				69	
		izations that do not follow SFAS 117, check here ▶			76.2%)			
R	. yu.i	70 through 74.	<u> </u>	d complete lines				
ķ I	70	Capital stock, trust principal, or current funds			70			
D	71	Paid-in or capital surplus, or land, building, and equ			71			
ב ב	72	Retained earnings, endowment, accumulated incom	e, or othe	er funds	994	,679.	72	991,646.
MACANTA DECT	73	Total net assets or fund balances (add lines 67 thro 72; column (A) must equal line 19; column (B) must	ough 69 o it equal li	r lines 70 through ne 21)	994	,679 <u>.</u>	73	991,646.
٦		Total liabilities and net assets/fund balances (add			1,413	,077.	74	1,394,447.

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.

BAA

	Reconciliation of Reven Financial Statements wit per Return (See Instructi	th Revenue		Reconcilia Financial S per Return	ation of Expenses Statements with E	per Audited xpenses
a -	Total revenue, gains, and other support per audited financial statements	a 1,103,869.	а	Total expenses and financial statements		1,106,902.
	Amounts included on line a but not on line 12, Form 990:		b	Amounts included or on line 17, Form 990		
• • •	Net unrealized gains on investments \$		(1) Donated services and use of facilities \$		
```	Donated serv- ces and use of facilities \$		(2	Prior year adjust- ments reported on line 20, Form 990 \$		
	Recoveries of prior year grants \$		(3	Losses reported on line 20, Form 990.		
(4)	Other (specify):		(4	) Other (specify)		
-	 \$			s		
7	Add amounts on lines (1) through (4)	b		Add amounts on lines (1)	through (4) <b>b</b>	
c l	_ine <b>a</b> minus line <b>b</b> ▶	c 1,103,869.	С	Line a minus line b	▶ с	1,106,902.
	Amounts included on line 12, Form 990 but not on line <b>a:</b>		d	Amounts included or Form 990 but not on		
r	nvestment expenses not included on line 6b, Form 990 \$		(1	) Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		(2	Other (specify):		
_						
7	S Add amounts on lines (1) and (2)	d		Add amounts on line	es (1) and (2) b d	<u> </u>
<b>e</b>	Total revenue per line 12, Form	e 1,103,869.	е	Total expenses per l 990 (line c plus line	ine 17, Form <b>e</b>	1,106,902.
Ü.	List of Officers, Directors,	Trustees, and Key E	mpl	oyees (List each one	e even if not compensa	
	(A) Name and address	(B) Title and average ho per week devoted to position	urs	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
109	IN TAUPER N. CORONA AVE ARWATER, FL 33765	President 40		44,657.	1,200.	0.
618	INDA YOUNG SMALLWOOD CIRCLE ARWATER, FL 33755	Vice President 40		30,447.	0.	0.
BETH 1371	H VOSS L MILTON ST ARWATER, FL 33756	Treasurer 40		21,003.	0.	0.
BET1	TINA POPE 7 ADMIRAL WOODSON LANE ARWATER, FL 33725	Secretary 40		20,986.	0.	0.
CAR( 1018	DL KIRTLEY B PINEBROOK DR ARWATER, FL 33756	Member/Dear)		27,786.	2,602.	0.
		-				
75	Did any officer, director, trustee, or k than \$100,000 from your organization \$10,000 was provided by the related If 'Yes,' attach schedule — see instru	n and all related organizations?	ons.	of which more than	_	Yes X No

Business code Amount Exclusion code Amount Primary K-9 Grade Edu  b  g Fees & contracts from government agencies  g Fees & contracts from government g Fees g Fee	(D	512, 513, or 514 (D) Amount  (E) Related or exen function incom  1,050,0	nė
93 Program service revenue: a Primary K-9 Grade Edu b  6 Medicare/Medicaid payments g Fee & contracts from government agencies 94 Membership dues and assessments. 95 Interest on savings & temporary cash invinits 95 Dividends & interest from securities 97 Net rental income or (foss) from securities 97 Net rental income or (foss) from securities 99 Other investment income 100 Gain or (foss) from sales of assets other than inventory. 93 Net rental income or (foss) from special events. 101 Ret income or (foss) from sales of assets other than inventory. 103 Other revenue: a  b  C  C  d  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute to the organization's exempt purposes of their than by providing funds for such purposes).  103 Total (add line 104, columns (B), (D), and (E))  Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute 105 plus line 1d, Part I), should equal the amount on line 12, Part II.  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute 105 plus line 1d, Part I), should equal the amount on line 12, Part II.  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute 105 plus line 1d, Part I), should equal the amount on line 12, Part II.  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute 105 plus line 1d, Part I), should equal the amount on line 12, Part II.  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute 105 plus line 1d, Part I), should equal the amount on line 12, Part II.  Relationship of Activities to the Accomplishment of Exempt Purposes (See institute 105 plus line 1d, Part I), should equal the amount on line 12, Part II.  Relationship of See institute 105 plus line 12, Part II.  Relationship of See institute 105 plus line 12, Part II.  Relationship of See institute 105 plus line 12, Part II.  Relationship of See institute 105 plu		Amount function incom	nė
Program service revenue:  a Primary K-9 Grade Edu  b  c  d  e  f Medicare/Medicaid payments g Fees & contracts from government agencies y Membership dues and assessments.  95 Interest on sevings & temporary cash invinits 96 Dividends & interest from securities 97 Net retail income or (loss) from real estate: a debt-financed property. b not debt-financed property. 98 Net retail income or (loss) from real estate: a debt-financed property. 99 Other investment income 100 Gain or (loss) from sales of assets other than inventory. 3 3 1011 Net income or (loss) from special events. 102 Gines profit or (loss) from special events. 103 Other revenue: a  b  Relationship of Activities to the Accomplishment of Exempt Purposes (See institution to the organization) severely purposes (other than by providing funds for such purposes).  93a Academic Instruction through school year for pre K-Grade 9  104 Funds used for exempt purposes stated above.  Information Regarding Taxable Subsidiaries and Disregarded Entities (See institution for the organization), during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contracts a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contracts a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract.  Information Regarding Transfers Associated with Personal Benefit Contracts a Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.  Note: If Yes's to 6b, the Form 8370 and Form 4270 (see instructions).  Under consequence of the payment was a proper to see the coccay be based or all internation or vincing payments and to the payments of the payments and the payments an			
a Primary K-9 Grade Edu b c c d d e f Medicare/Medicated payments g Fees & contracts from government agencies 94 Membership dues and assessments. 95 Interest in sewing & temporary cash invinits 95 Dividends & interest from securities 97 Net rental income or (loss) from real estate: a debt-financed property. b not debt-financed property. b not debt-financed property. c and in ord (loss) from pers prop 99 Other investment income 100 Gain or (loss) from seales of assets other than income or (loss) from speal events. 101 Ret income or (loss) from speal events. 102 Geosprofe or (loss) from sales of assets other than inventory. 103 Other revenue: a b c d d 104 Subttel (add columns (B), (D), and (E)). 105 Total (add lime 104, columns (B), (D), and (E)). 106 Total (add lime 104, columns (B), (D), and (E)). 107 Relationship of Activities to the Accomplishment of Exempt Purposes (See institution of the organization's exempt purposes (other than by providing funds for such purposes) 100 Funds used for exempt purposes stated above.  101 Interest used for exempt purposes stated above.  102 Information Regarding Taxable Subsidiaries and Disregarded Entities (See institution) 105 Total (and lime) (A) (C) (C) (D) 106 Name, address, and EIN of corporation, partnership, or disregarded entity 107 Partnership, or disregarded entity 108 Percentage of onesting interest of the organization, during the year, peap premiums, directly or indirectly, on a personal benefit contracts a Did the organization, during the year, peap premiums, directly or indirectly, on a personal benefit contracts 100 Information Regarding Transfers Associated with Personal Benefit contracts 101 Percentage of one properties of the partnership of the properties of the par		1,050,0	
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USE [employed].   6925 112TH CITCLE N., SUITE 102   EIN	-	EIN ► N/A	
Only address, and Largo, FL 33773	EIN L	Phone no ► (727) 548-4400	

#### SCHEDULE A (Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2004

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 DELPHI ACADEMY OF FLORIDA 59-2369510 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (d) Contributions to employee benefit plans and deferred (a) Name and address of each (b) Title and average (c) Compensation (e) Expense employee paid more than \$50,000 hours per week devoted to position account and other allowances compensation None Total number of other employees paid over \$50,000. Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over \$50,000 for professional services

Sche	dule	e A (Form 990 or 990-EZ) 2004 DELPHI ACADEMY OF FLORIDA 59-236951	0	F	age <b>2</b>
	W.	Statements About Activities (See instructions.)		Yes	No
1	to	ring the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid			
		incurred in connection with the lobbying activities . • \$ N/A			
		ust equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	esto Constitution	X
	Org org lob	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other parizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
2	SUŁ	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 with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal neficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
a	Sal	le, exchange, or leasing of property?	2a		Х
b	Ler	nding of money or other extension of credit?	2b		Х
c	Fur	rnishing of goods, services, or facilities?	2c		<u>x</u>
d	Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Х
е	Tra	ansfer of any part of its income or assets?	2e		X
3 <b>a</b>	Do exp	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an planation of how you determine that recipients qualify to receive payments.)	3a		Х
		you have a section 403(b) annuity plan for your employees?	3b	Х	
4 a	Did	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?	4a		x
		you provide credit counseling, debt management, credit repair, or debt negotiation services?	46	$\dashv$	X
- 53	ji uga	Reason for Non-Private Foundation Status (See Instructions.)			
The o	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	X	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital	s name	e, city	<b>'</b> ,
		and state >			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the <b>Support Schedule</b> in Part IV-A.)	170(b	)(1)(	4)(IV).
11 a		An organization that normally receives a substantial part of its support from a governmental unit or from the general Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	public.	•	
11 b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A)			
12		An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, ar from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	of its s ed by ti	uppor ne	∋ıpts t
13	L_	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports org described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(section 509(a)(3).)	janizati 2). (Se	ons e	
		Provide the following information about the supported organizations. (See instructions.)			
		(a) Name(s) of supported organization(s)	(b) Lin	e nur	
		<u></u>			
14 BAA		An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)  TEFANOR 07/27/04 Schedule <b>A</b> (Form 990 or Fo	orm 99	0-EZ\	2004
		TEEA0402L 07/27/04 Schedule A (Form 990 of Fo		,	

	Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.  Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.									
Cale	ndar year (or fiscal year	<b>(a)</b> 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total				
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.).	N/A				10,0.				
16	Membership fees received					<u> </u>				
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose									
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975									
19	Net income from unrelated business activities not included in line 18									
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.									
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.									
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets									
23	Total of lines 15 through 22									
	Line 23 minus line 17		<u> </u>							
	Enter 1% of line 23				37 /3					
	Organizations described on line			olumn (e), line 24						
L	Prepare a list for your records to show the supported organization) whose total gifts f return. Enter the total of all these excess	or 2000 through 2003 excee	eded the amount shown in l	ine 26a. <b>Do not file this lis</b>	st with your					
	Total support for section 509(a)(1		column (e)		> 260	490gg/9 50 50 50				
C	Add: Amounts from column (e) for			19 26b	260	20072				
	Public support (line 26c minus lir	<b>22</b>	<del></del>	200	▶ 26€	<del> </del>				
	Public support percentage (line					8				
27	Organizations described on line For amounts included in lines 15 name of, and total amounts rece such amounts for each year:	12: N/A 16, and 17 that were ved in each year from	e received from a 'dis m, each 'disqualified	qualified person, pre person. Do not file th	pare a list for your r is list with your retu	ecords to show the urn. Enter the sum of				
l	(2003) (2002) (2001) (2000) <b>b</b> For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the <b>larger</b> of <b>(1)</b> the amount on line 25 for the year or <b>(2)</b> \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) <b>Do not file this list with your return.</b> After computing the difference between the amount received and the larger amount described in <b>(1)</b> or <b>(2)</b> , enter the sum of these differences (the excess amounts) for each year:									
_	(2003) (a) from column (a) fr	(2002)	(2001) _		_ (2000)					
C	Add: Amounts from column (e) for 17    Add: Line 27a total	л ппез. — 20	<del></del>	21	97.	:				
d	I Add: Line 27a total	ar	nd line 27b total .		270	1				
е	Public support (line 27c total min	us line 27d total)			► 27€					
f	Total support for section 509(a)(2	2) test: Enter amount	from line 23, column	(e) ► 27f						
	Public support percentage (line				▶ 27 ⊊					
	Investment income percentage (					·				
28	Unusual Grants: For an organizalist for your records to show, for nature of the grant. Do not file the	tion described in line each year, the name is list with your retui	10, 11, or 12 that regold the contributor, the rn. Do not include the	ceived any unusual gr e date and amount of ese grants in line 15.	rants during 2000 the the grant, and a bri N/A	rough 2003, prepare a ef description of the				

Private School Questionnaire (See Instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

_			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Х	
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	X	
31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	X	**
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)  Publishes yearly in local newpapers statement of racially non-discriminatory policy.			
	Does the organization maintain the following:			
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a	<u>X</u>	
	<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b	<u>_x</u>	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c	Х	
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			72. 73.
33	Does the organization discriminate by race in any way with respect to:			
	a Students' rights or privileges?	33a	· · · · · · · · · · · · · · · · · · ·	X
	<b>b</b> Admissions policies?	33b		x
	c Employment of faculty or administrative staff?	33 c		х
	d Scholarships or other financial assistance?	33 d		Х
	e Educational policies?	33e		Х
1	f Use of facilities?	33f		Х
,	<b>g</b> Athletic programs?	33 g	!	X
	h Other extracurricular activities?	33 h		Х
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34a		х
	<b>b</b> Has the organization's right to such aid ever been revoked or suspended?	34b		Х
	If you answered 'Yes' to either 34a or b, 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	Х	

kolonena	(To be complet	<b>xpenditures by Ele</b> ted <b>ONLY</b> by an eligible	cting Public Chari organization that filed	<b>ties</b> (See instructi Form 5768)	ons.)		N/A		
Che	ck Pa If the organi	zation belongs to an af	filiated group. Check	<b>b</b> If you o	hecked 'a' a	and 'limited co	ntrol' provisions apply.		
		imits on Lobbying	•	ed.)	Aff	(a) iliated group totals	(b) To be completed for ALL electing organizations		
36	Total lobbying expendit	ures to influence public	opinion (grassroots lo	obvina)	36		- Organizations		
37		ures to influence a legis			37				
38		ures (add lines 36 and	• •		38				
39	Other exempt purpose			<u>.</u>	39				
40		expenditures (add lines		[	40				
41	Lobbying nontaxable ar			ble –					
	If the amount on line 40		lobbying nontaxable a	<b>100</b>		4, 5, 5			
	Not over \$500,000	20%							
	Over \$500,000 but not over \$1	,000,000 \$100,	.000 plus 15% of the excess (	over \$500,000			<i>177.</i> 444. 1		
	Over \$1,000,000 but not over \$	\$1,500,000 \$175,	,000 plus 10% of the excess (	over \$1,000,000	41				
	Over \$1,500,000 but not over \$								
	Over \$17,000,000								
42	Grassroots nontaxable								
43	Subtract line 42 from lin	ne 36. Enter -0- if line 4	12 is more than line 36		43				
44	Subtract line 41 from lin				44	en Tongua			
	Caution: If there is an a	amount on either line 4	3 or line 44, you must i	file Form 4720.					
	4 -Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the instructions for lines 45 through 50.)								
	Lobbying Expenditures During 4 -Year Averaging Period								
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2004	<b>(b)</b> 2003	<b>(c)</b> 2002		<b>(d)</b> 2001	(e) Total		
45	Lobbying nontaxable amount		14/1/1			400	~		
46	Lobbying ceiling amount (150% of line 45(e))					* A 4.			
47	Total lobbying expenditures				-				
48 	Grassroots non- taxable amount				/////				
<b>49</b>	Grassroots ceiling amount (150% of line 48(e))								
50	Grassroots lobbying expenditures	otivity, by Namalast	ing Dublic Chault						
	(For reporting of	ctivity by Nonelect	at did not complete Pa	rt VI-A) (See ınstrı		<del></del>	N/A		
atter	ng the year, did the organet to influence public of	nization attempt to infit pinion on a legislative n	ience national, state or natter or referendum, t	nrough the use of:	ncluding an	Yes No	Amount		
_	Volunteers								
	b Paid staff or management (Include compensation in expenses reported on lines c through h.).								
	c Media advertisements								
	<del>-</del>	= :				····			
	Publications, or publish					. —			
	Grants to other organizations of Grants to other organization of Grants of G			enielative body	• • • • • • • • • • • • • • • • • • • •	· <del>                                    </del>			
_	Rallies, demonstrations								
	Total lobbying expendit			-					
•	'	ve, also attach a stateme≀				2 220			
	ii 103 to driy of the above	o, also attach a stateme	in giving a detailed desci	APRIORI OF THE HUDDYII	g activities.				

# Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

51 Did the reporting of the Code (other	rganızatıon i than sectior	directly or ir n 501(c)(3) c	idirectly engage in any of th organizations) or in section	ne follow: 527, relai	ng with any other organization describe ting to political organizations?	ed in secti	on 50	1(c)
· · · · · · · · · · · · · · · · · · ·			o a noncharitable exempt of		-	[	Yes	No
(i) Cash				. ,		51 a (i)		X
(ii)Other assets			***			a (ii)		Х
<b>b</b> Other transactions:								
(i)Sales or excha	nges of asse	ets with a ne	oncharitable exempt organi	zation		b (i)		X
(ii)Purchases of a	ssets from a	a noncharita	ble exempt organization.			b (ii)		X
(iii)Rental of facilit						b (iii)		X
(iv)Reimbursemen	t arrangeme	ents				b (iv)		X
(v)Loans or loan	guarantees					b (v)		X
(vi)Performance of	f services or	r membersh	p or fundraising solicitation	ıs		b (vi)		X
			ts, other assets, or paid en			С		X
d if the answer to an	y of the abo	ve is 'Yes,'	complete the following scho	edule, Co	lumn (b) should always show the fair n	narket valu	ue of	
any transaction or	sharing arra	ingement, sl	now in column (d) the value	of the g	lumn (b) should always show the fair in organization received less than fair ma oods, other assets, or services received	iket value	: III 	
(a) (b) Line no. Amount i	) [		(c) noncharitable exempt organ		(d) Description of transfers, transactions, and s			is .
N/A								
N/A	<del></del>	<del></del> -						
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<del> </del>			<del></del>	-				
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52a Is the organization described in section b If 'Yes,' complete ti	n 501(c) of t	the Code (ot	liated with, or related to, or her than section 501(c)(3))	ne or mor or in sec	re tax-exempt organizations tion 527?	► ☐ Ye	s X	No
(a	)	30,12,3,13,13	(b)		(c)			
Name of or	ganızatıon		Type of organizatio	n	<b>(c)</b> Description of relation	ship		
N/A			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
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### **Federal Statements**

Page 1

### **DELPHI ACADEMY OF FLORIDA**

59-2369510

#### Statement 1 Form 990, Part I, Line 8 Net Gain (Loss) from Noninventory Sales

Other Assets

Description:
Date Acquired:
How Acquired:
Date Sold:
To Whom Sold:

1980 BUS 1/01/1990 Purchase 10/22/2004 EBAY

Gross Sales Price: Cost or Other Basis: Depreciation: 1,000. 26,403. 26,403.

Gain (Loss)

1,000.

Total Gain (Loss) Other Assets \$ 1,000.

Total Net Gain (Loss) From Noninventory Sales \$ 1,000.

### Statement 2 Form 990, Part II, Line 43 Other Expenses

		(A)	(B)	(C)	(D)
		Total	Program <u>Services</u>	Management <u>&amp; General</u>	Fundraising
ADVERTISING		39,614.	39,614.		
BANK CHARGES		1,144.	1,144.		
CASUAL LABOR		1,033.	1,033.		
COMPUTER EXPENSE		6,210.	6,210.		
COPIER EXPENSE		11,484.	11,484.		
COURSE MATERIAL		20,890.	20,890.		
CREDIT CARD DISCOUNT		9,818.	9,818.		
CURRIC EXPENSE		56,277.	56,277.		
DUES & SUBSCRIPTIONS		125.	125.		
FIELD REPS		10,130.	10,130.		
FUNDRAISING EXPENSE		8,590.	•		8,590.
INSURANCE		33,365.	33,365.		·
LAB/SHOP EXPENSE		2,247.	2,247.		
LICENSE FEES		63,737.	63,737.		
MAINTENANCE		28,683.	28,683.		
MISCELLANEOUS EXPENSE		3,641.	3,641.		
OFFICE EXPENSE		602.	602.		
RESALE MATERIAL		5,267.	5,267.		
STUDENT ACTIVITY		6,513.	6,513.		
STUDENT COUNCIL EXPENSE		2,756.	2,756.		
SUBCONTRACTOR EXPENSE		7,000.	7,000.		
TAXES - OTHER		569.	569.		
TRAINING		738.	738.		
UNIFORM EXPENSE		459.	459.		
UTILITIES		41,184.	41,184.		
VEHICLE EXPENSE		4,656.	4,656.		
	Total \$	366,732.	\$ 358,142.	\$ 0.	\$ 8,590.

2004 Federal St	tatem	ents			Page 2
DELPHI ACADE	MY OF F	LORIDA			59-236951
Statement 3 Form 990, Part IV, Line 57 Land, Buildings, and Equipment					
Category	B	asis	Accum. Deprec.		Book Value
Automobiles / Transportation Equipment Furniture and Fixtures Buildings Land		58,250. \$ 321,509. 579,367. 328,825.	35,111. 228,364. 184,557.	\$	23,139. 93,145. 394,810. 328,825.
	\$ 1,	287,951.	448,032.	\$	839,919.
Statement 4 Form 990, Part IV, Line 58 Other Assets  DEPOSITS - ABLE SCHOOL UNIFORMS			Total	\$ <u>\$</u>	2,543. 1,441. 3,984.
Statement 5 Form 990, Part IV, Line 65 Other Liabilities					

2004 Federal Exempt Organization Tax Summary	Page 1
DELPHI ACADEMY OF FLORIDA	59-2369510
REVENUE Contributions, gifts, and grants Program service revenue Interest on savings/temp cash invest Net gain (loss) - noninv. assets/disp	38,589 1,050,049 14,231 1,000
Total revenue	1,103,869
EXPENSES Program services Management and general Fundraising	1,095,812 2,500 8,590
Total expenses	1,106,902
NET ASSETS OR FUND BALANCES  Excess or (deficit) for the year	-3,033 994,679 991,646

12/31/04			50 	2004 Fed	era	Boo	k Dep	deral Book Depreciation Schedule	ion Sc	:hedu	<u>e</u>					Page 1
					DEL	PHI A(	SADEMY	DELPHI ACADEMY OF FLORIDA	RIDA						25	59-2369510
Ż	Description	Date Acquired	Date Sold	Cost/ Basis	Bus.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ So. Deor.	Prior Dec. Bal. Deor.	Salvage /Basis Reductn	Depr. Basis	Prior Deor.	Method	Life Rate	Rate	Current Deor.
Form 990/990-PF					1											-
Auto / Tran	Auto / Transport Equipment															
1 1980 BUS	S	1/01/90	10/22/04	26,403							26,403	26,403	200DB HY	ۍ		0
2 1990 CHI	1990 CHEVY VAN	6/11/98		17,150							17,150	17,150	200DB HY			0
3 FIRST CI	FIRST CLASS COACH-YEL BUS	6/07/02	ı	41,100	•						41,100	10,773	200DB HY		.17490	7,188
Total Au	Total Auto / Transport Equipment			84,653		0	0	0	0	0	84,653	54,326				7,188
Buildings	,															
22 BUILDINGS	- IGS	9/01/83		255,000							255,000	91,532	S/L MM	33	.02564	6,538
23 BLDG IM	BLDG IMPROVEMENTS	1/01/95		800'29							800'29	15,462	S/L MM	93	.02564	1,718
24 BLDG IM	BLDG IMPROVEMNETS	1/01/96		73,782							73,782	41,445	S/L MM	15	0.0990	4,921
25 BLDG IM	BLDG IMPROVMENTS	1/01/97		44,335							44,335	6,822	S/L MM	8	.02564	1,137
26 BLDG IM	BLDG IMPROVEMENTS	6/30/38		9€							946	601	S/L MM	£	.02564	24
27 BLDG IM	BLDG IMPROVEMENTS	00/08/9		7,415							7,415	926	S/L MM	27.5	.03636	270
28 BLDG IM	BLDG IMPROVEMENTS/ROOF #3	6/22/01		8,400							8,400	1,400	S/L HY	15	.06670	26
	BLDG  MPROVEMENTS/A/C #1&	6/30/01		27,175							27,175	4,530			.06670	1,813
	BLDG IMPROVEMENTS	6/30/02		33,385							33,385	2,003			9400	1,335
	BLDG  MPROVEMENTS/NEW ROO	6/30/03		24,500							24,500	34			.02564	83
34 BLDG IM	BLDG IMPROVEMENTS	6/30/04	I	37,421	I						37,421		S/L MM	8	.02708	1,013
Total Buildings	ııldıngs			279,367		0	0	0	0	0	279,367	164,600				19,957
Furniture and Fixtures	id Fixtures															
,																
																-
•																

12/31/04		20	2004 Federal Book Depreciation Schedule	leral	Boo	k Dep	reciat	ion S	hedu	ie ie					Page 2
				DEL	PHI A	CADEM	DELPHI ACADEMY OF FLORIDA	ORIDA						26	59-2369510
No. Description	Date n Acquired	Date Sold	Cost/ Basis	Bus.	Cur 179 Bonus	Special Depr. Allow	Prior 179/ Bonus/ Sp. Depr.	Pnor Dec. Bal. Depr.	Salvage /Basis Reductn	Depr. Basis	Prior Depr.	Method	ग्राह	Rate	Current Depr.
4 COURSE EQUIPMENT	1/01/94		68,089							68,089	68,089	3/1	2	.10000	0
5 OFFICE EQUIPMENT	9/01/83		36,811							36,811	36,811	200DB HY	2		0
6 COURSE EQUIPMENT	96/02/9		20,773							20,773	20,773	S/L HY	7		0
7 OFFICE EQUIPMENT	96/02/9		5,189							5,189	5,189	S/L HY	7		0
8 COURSE EQUIPMENT	1/01/97		28,073							28,073	24,062	S/L	7	.14285	4,010
9 OFFICE EQUIPMENT	1/01/97		150							150	126	S/L	7	.14285	21
10 COURSE EQUIPMENT	86/02/9		8,855							8,855	7,589	S/L	7	.14285	1,266
11 OFFICE EQUIPMENT	86/06/9		3,126							3,126	2,681	S/L	7	.14285	445
12 COURSE EQUIPMENT	66/02/9		11,165							11,165	7,177	S/L	7	.14285	1,595
13 OFFICE EQUIPMENT	66/06/9		4,113							4,113	2,645	S/L	7	.14285	88
14 COURSE EQUIPMENT	00/08/9		11,098							11,098	5,550	S/L	7	.14285	1,585
15 OFFICE EQUIPMENT	00/08/9		3,561							3,561	1,781	S/L	7	.14285	203
16 COURSE EQUIPMENT	10/08/9		33,722							33,722	12,045	S/L	7	.14285	4,817
17 OFFICE EQUIPMENT	10/08/9		1,074							1,074	333	S/L	7	.14285	153
18 COURSE EQUIPMENT	6/30/05	•	8,981							8,981	1,924	S/L	7	.14285	1,283
19 OFFICE EQUIPMENT	6/30/02		2,883							2,883	1,500	200DB HY	5	.19200	224
20 COURSE EQUIPMENT	6/30/03		32,885							32,885	2,349	S/L	7	.14285	4,698
21 OFFICE EQUIPMENT	6/30/03		4,378							4,378	313	S/L	7	.14285	625
35 COURSE EQUIPMENT	6/30/04		35,830							35,830		200DB HY	7	.14290	5,120
36 OFFICE EQUIPMENT	6/30/04	•	753	ł	į	Ì			į	753		200DB HY	7	.14290	801
Total Furniture and Fixtures	ures		321,509		0	0	J	0	0	321,509	200,987				TE,13
Land															
32 LAND	9/01/83		320,000							320,000					0
33 LAND IMPROVEMENTS		•	8,825	ı					İ	8,825				ļ	0
Total Land			328,825		0	0	3	0 0	0	328,825	0				0
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Page 3	59-2369510	Current Depr.	28	ক্র	35	
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			419,913	419,913	26,403	
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2004 Federal Book Depreciation Schedule		Salvage /Basis Reductn			0 0	
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4			Total Depreciation	Grand Total Depreciation	Depreciation Assets Sold Depr Remaining Assets	
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12/31/04		No				,

STATE SECTIONS OF THE PARTY