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

2002

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No 1545-0047

A N N A A A A A	Address change Address change Name change Initial return Final return Application pending  Please use IRS label or print or type See Specific Instructions.  Please use IRS label or Print or Christian World Foundati Number and street (or P 0 box if mail is not delivered to some state or country and ZIP + 4 Hendersonville NC  Section 501(c)(3) organizations and 4947(a)(1) nonexempt challenges  Please use IRS label or Print or Christian World Foundati Christian World Foundati Number and street (or P 0 box if mail is not delivered to some state or country and ZIP + 4 Hendersonville NC		Room/suite	57- E Telepi 828	hone number  -693-7007  nting method Cash				
N In A	Address change label or print or Christian World Foundati Christian World Foundati Initial return type Number and street (or P 0 box if mail is not delivered to some specific Instructions, Application pending the street of the street for P 0 box if mail is not delivered to some specific Instructions, and Seventh Avenue East City or town state or country and ZIP + 4 Hendersonville NC	street address)	Room/suite	E Telepi 828 F Accou	hone number -693-7007 nting method Cash				
G We	Initial return Final return Final return See Specific Instruc- Application pending See Specific Instruction Pending See	street address)	Room/suite	828 F Accou	-693-7007 nting method Cash				
G We	Final return See Specific Instruc- Application pending Hons. See Specific Instruc- Application pending Hons. Hendersonville NC		Room/suite	F Accou	nting method Cash				
G We	Amended return Specific City or town state or country and ZIP + 4  Application pending tions, Hendersonville NC	28792			<u> </u>				
G We	Amended return Instruc- Application pending tions. Hendersonville NC	28792		X Accrual					
G We	Application pending tions, Hendersonville NC	<u> 28792</u>	la la		Other (specify)				
G We	Section 501(c)(3) organizations and 4947(a)(1) nonexempt cha		<u></u>	<u> </u>					
		aritable Ha	and I are not applicable to sec	tion 527 organ	nizations				
	trusts must attach a completed Schedule A (Form 990 or 990-	ÆZ) H(a	a) is this a group return for a	affiliates?	∐ Yes 🛛 No				
J Ore	eb site 🕨	H(t	b) If "Yes " enter no of affilia	ates 🕨					
T T.	rganization type	Н(с	c) Are all affiliates included?		Yes No				
(che	heck only one) ▶ 🛛 501(c) ( 3 ) < (insert no ) ☐ 4947(a)(1) or	527	(If "No " att a list See ins	str )					
K Che	heck here I If the organization's gross receipts are normally not more that	n H(c	d) is this a separate return f	led by an	_				
\$25	25,000 The organization need not file a return with the IRS, but if the organization	1	organization covered by a	group ruling	? Yes No				
	ceived a Form 990 Package in the mail, it should file a return without financial data		Enter 4-digit GEN	<b>&gt;</b>					
	ome states require a complete return		M Check ▶ If the	organizatio	n is not required				
		2,497	to attach Sch B (Form	n 990, 990-E	EZ, or 990-PF)				
Part									
	Contributions, gifts, grants, and similar amounts received		( )	1					
	a Direct public support	1a	528,554						
	b Indirect public support	1b		1					
	a contract to the second to th	1c		1					
	500 EE4		١	10	528,554				
		· · · · · · · · · · · · · · · · · · ·		2					
	2 Program service revenue including government fees and contracts (from Pa	ait vii, liile 55)		3					
	·	·							
	4 Interest on savings and temporary cash investments	5	3,943						
1	5 Dividends and interest from securities	ross rents 6a							
	b Less rental expenses								
_   .	c Net rental income or (loss) (subtract line 6b from line 6a)			6c					
R   T	7 Other investment income (describe	<del></del>		7	<del></del>				
v   '	8a Gross amount from sales of assets other (A) Secuntie	<del></del>	(B) Other	-					
e n	than inventory	8a		-					
u I	b Less cost or other basis and sales expenses	8b		-					
5003	c Gain or (loss) (attach schedule)	8c		-					
0 2	d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d					
က ၂ ၂	9 Special events and activities (attach schedule)								
	a Gross revenue (not including \$ of								
APR	contributions reported on line 1a)	9a		<b> </b>					
_	b Less direct expenses other than fundraising expenses	9b		4					
c	c Net income or (loss) from special events (subtract line 9b from line 9a)	,		9c	<del></del>				
및   1·	10a Gross sales of inventory, less returns and allowances	10a		4 1					
<u> </u>	b Less cost of goods sold	10b		<b>↓</b>					
₹	c Gross profit or (loss) from sales of inventory (att. sch.) (subtract line 10b fro	om line 10a)		10c					
SCANAIED 1	11 Other revenue (from Part VII, line 103)	DESCRIPTION	== 7	11					
	12 Total revenue (add lines 1d 2 3, 4, 5 6c, 7 8d, 9c 10c and 11)	RECEIVI	<u> </u>	12	532,497				
	13 Program services (from line 44, column (B))		၂၇၂	13	<u>87,323</u>				
	14 Management and general (from line 44, column (C))	APR 27 2	ကျေး ပြု	14					
E 1 x p 1	TOTAL T		10)	15	<u></u>				
E 1 x p 1. e 1	15 Fundraising (from line 44, column (D))		1 334						
E 1 x p 1 n 1 s 1	16 Payments to affiliates (attach schedule)	<del></del>	<u>-                                    </u>	16					
x p 1. e 1 n 5 1	16 Payments to affiliates (attach schedule)	GPEN,	<u>nt</u>	16	87,323				
x p 1 e 1 s 1 e 1	16 Payments to affiliates (attach schedule)	<del></del>	uf E	· · · · · · ·	445,174				
x p 1. e 1 n 1 s 1 s 1 A 1 Ns 1	Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))	DODEN,	nt.	17					
x p 1. 8 1 5 1 8 1 Ns 1 Ns 1	Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))  Excess or (deficit) for the year (subtract line 17 from line 12)	DODEN,	nt.	17	445,174				
x 1 8 1 5 1 8 1 8 1 Ns 1 0 t t 2	Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))  Excess or (deficit) for the year (subtract line 17 from line 12)  Net assets or fund balances at beginning of year (from line 73, column (A))	DODEN,	nt.	17 18 19	445,174				

				ired for section 501(c)(3) a	-
Functional Expenses and section 4947	(a)(1) non	exempt chantable trusts b		1	is )
Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I			services	and general	<del>                                     </del>
22 Grants and allocations (attach schedule)	.				
(cash \$ cash \$	22			{	
23 Specific assistance to individuals	23			<del>{</del>	
24 Benefits paid to or for members	24	_ · · · · · ·			<del> </del>
25 Compensation of officers, directors etc	25			<del>  </del>	
26 Other salaries and wages	26		<del>-</del>		<del>                                     </del>
Pension plan contributions	27				<del> </del>
28 Other employee benefits	28	416	416		
29 Payroll taxes	29				
30 Professional fundraising fees	_30				
11 Accounting fees	31				
32 Legal fees	32				
3 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36	6,903	6,903		
RF Equipment rental and maintenance	37	0,000			
	38				
88 Printing and publications			<del></del>		
39 Travel	39				
10 Conferences, conventions, and meetings	40				<del> </del>
Interest	41	<del></del>			
Depreciation, depletion, etc. (attach schedule)	42	=			<u> </u>
Other expenses not covered above (itemize)	43a				
ь See Statement 1	43b	80,004	80,004		
c	43c				<u> </u>
d	43d	<del></del> -			
е	43e				<u> </u>
14 Total functional expenses (add lines 22 - 43) Organizations					
completing columns (B)-(D), carry these totals to lines 13-15	44	87,323	87,323	] 0	0
Ioint Costs Check ▶ If you are following SOP 98-2					
Are any joint costs from a combined educational campaign and	fundrais	ing solicitation reported	d in (B) Program servic	æs?	Yes No
f "Yes " enter (i) the aggregate amount of these joint costs \$			amount allocated to Prog		
III) the amount allocated to Management and general \$			amount allocated to Fund		
Part III Statement of Program Service Acc	ompli				-
What is the organization's primary exempt purpose?	,	ominomo (oco pa	90 21 01 110 1101	dollorio y	Program Service
See Statement 2					Expenses
All organizations must describe their exempt purpose achievem	nents in a	clear and concise ma	nner State the numbe	г	(Required for 501(c)(3) & (4) orgs & 4947(a)(1)
All organizations must describe their exempt purpose achievem of clients served publications issued, etc. Discuss achievemen	ts that a	re not measurable (Se	ction 501(c)(3) and (4)		trusts but optional for
organizations and 4947(a)(1) nonexempt chantable trusts must				iers }	others )
a The Organization supported					
which coordinated 210-220 a					
8-10 foreign countries by c	oup⊥			es.	
<del></del>		(Grants and all	locations \$		87,323
b					
					ļ
		(Grants and all	locations \$		
c					
		(Grants and al	locations \$	)	
d	•	•			
<del>-</del>					
		(Create red al	leestone f	<b>\</b>	
		(Palathic ann an	iocanons a		
a Other groups (attach echedula)	Stm	(Grants and al			
e Other program services (attach schedule) See  f Total of Program Service Expenses (should equal line 44	Stm	t 3 (Grants and al	locations \$		87,323

#### Part IV Balance Sheets (See page 24 of the instructions )

	Note	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		139,590	45	586,348
	46	Savings and temporary cash investments			46	
	l		1470 1			
	47a	Accounts receivable	47a		47.	
	6	Less allowance for doubtful accounts	47b		47c	
	40-	Diadasa sasawahia	490			
	48a	Pledges receivable Less allowance for doubtful accounts	48a		48c	
	,b	Grants receivable	(460)		49	
	49 50	Receivables from officers directors, trustees and	key employees		-44	
A	50	(attach schedule)	key omployees		50	
^ \$	51a			<del></del>		
5 5	""	schedule)	51a			
3 8	Ь	Less allowance for doubtful accounts	51b		51c	
t	52	Inventories for sale or use			52	•
S	53	Prepaid expenses and deferred charges			53	
-	54	Investments-securities	► ☐ Cost ☐ FMV		54	
	55a	Investments-land, buildings and	_ <b>_</b>			
		equipment basis	55a			
	ь	Less accumulated depreciation (attach				
		schedule)	55b		55c	
	56	Investments-other (attach schedule)			56	
	57a	Land, buildings, and equipment basis	57a		1 1	
	b	Less accumulated depreciation (attach				
		schedule)	57b		57c	
	58	Other assets (describe	)		58	
	59	Total assets (add lines 45 through 58) (must equal	al line 74)	139,590		586,348
L	60	Accounts payable and accrued expenses		_	60	-
ī	61	Grants payable			61	
a	62	Deferred revenue			62	· · · · · · · · · · · · · · · · · · ·
b I	63	Loans from officers, directors, trustees, and key er	mployees (attach			
ĺ	l	schedule)		<u> </u>	63	
	I .	Tax-exempt bond liabilities (attach schedule)			64a 64b	·
ì	b	Mortgages and other notes payable (attach sched			65	1,584
0	65	Other liabilities (describe <u>See Stm</u>	<u>(C 4</u> )		65	1,304
S	66	Total liabilities (add lines 60 through 65)		o	66	1,584
	t	nizations that follow SFAS 117, check here	and complete lines		- 55	1,001
	Oiga	67 through 69 and lines 73 and 74	gg and complete into		ļ '	
NF	67	Unrestricted		126,485	67	<u>578,226</u>
eц		Temporarily restricted		13,105		6,538
t n	60	Permanently restricted			69	
, d	I	nizations that do not follow SFAS 117, check he	ere ▶ ∏ and			
A s B	1 -	complete lines 70 through 74				
s a	70	Capital stock, trust principal, or current funds			70	
e I	71	Paid-in or capital surplus, or land, building, and eq	uipment fund		71	
ta sn	72	Retained earnings, endowment, accumulated inco			72	
C	73	Total net assets or fund balances (add lines 67				
0 e		70 through 72,				
rs		column (A) must equal line 19, column (B) must e	equal line 21)	139,590		584,764
	74	Total liabilities and net assets / fund balances		139,590	74	586,348

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.

Bob Harding CFO/Sec. O 0 Hendersonville NC As Needed Tomilee Harding Director Hendersonville NC As Needed Anıta Thomas Acct. Mgr. 0 Hendersonville NC As Needed Marshall Blalock Chairman 0 0 Charleston SC As Needed Carolyn Self Member 0 0 Mt. Pleasant SC As Needed Jım Richardson Director 0 0 Sharpsville IN As Needed Lynn Rathbun Director 0 0 As Needed Ithaca NY Bridget Davenport Director 0 O Landrum SC As Needed Dr. Maria Moore Director 0 Hendersonville NC As Needed

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100 000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule-see page 26 of the instructions

▶ [	Yes	$\boxtimes$	No
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Form	990 (2002) Christian World Foundation 57-1046124		<u>P</u> ;	age 5
_ <u>Pa</u>	art 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 description of			
	each activity	76	L	_X_
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	ļ	<u>X</u>
	If "Yes," attach a conformed copy of the changes	1	ļ	ĺ
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?	78a		<u>X</u>
b	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? If "Yes," attach a			l
	statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common			
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes" enter the name of the organization			
	and check whether it is exempt or nonexempt			
81a	Enter direct or indirect political expenditures. See line 81 instr.	]		ĺ
b	Did the organization file Form 1120-POL for this year?	81b		<u>X</u>
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or at substantially less than fair rental value?	82a		<u> </u>
ь	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue			
	in Part I or as an expense in Part II (See instructions in Part III )	1		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	
ь	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?  N/A	83b		$\Box$
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	-	X
ь	If "Yes " did the organization include with every solicitation an express statement that such contributions			
_	or gifts were not tax deductible?	84b		1
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?  N/A	85a		$\overline{}$
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  N/A	85b		
_	If "Yes" was answered to either 85a or 85b do not complete 85c through 85h below unless the organization	100		
	received a waiver for proxy tax owed for the prior year			
С	Dues, assessments, and similar amounts from members			
ď	Section 162(e) lobbying and political expenditures  85d	1		1
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices  85e	1		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f	1		
	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?  N/A	85g_		1
9	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable	- 65 <u>g</u>		$\overline{}$
h	estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?  N/A	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	0311		
	Gross receipts, included on line 12, for public use of club facilities  86b	1		
b 07	501(c)(12) orgs Enter a Gross income from members or shareholders  87a	1		
87		1		
b	Gross income from other sources (Do not net amounts due or paid to other			
50	sources against amounts due or received from them )  87b	1		
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or			1
	partnership, or an entity disregarded as separate from the organization under Regulations sections			X
	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 the year under			1
_	section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			1
þ	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction	}		1
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach			
	a statement explaining each transaction	89b		X
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			_
	sections 4912, 4955, and 4958			<u> </u>
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			0
90a	List the states with which a copy of this return is filed None			
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions )			
91	The books are in care of ▶ Robert Harding Telephone no ▶ 828-	693	- /0	U /
	Located at ▶ 303 7th Avenue East, Hendersonville NC ZIP+4 ▶ 28792			
92	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here			▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the tax year			
		Form	990	(2002)

Part VII	Analysis of Income-Pro	ducing Activities	s (See pag	e 31 of the instru	ctions	)	<del></del>
	gross amounts unless otherwise			d business income	1	by sec 512 513 or 514	(E)
indicated			(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function
	service revenue	-			COGB		income
	<del></del>		-	· · · · · · · · · · · · · · · · · · ·			<u> </u>
<u> </u>							-
f Medicars	e/Medicaid payments						
	d contracts from government agenc	ies	-				
_	ship dues and assessments						
-	on savings and temporary cash inve	estments					3,943
	is and interest from securities						
	al income or (loss) from real estate	1					-
	inced property						, ·
	-financed property						
	al income or (loss) from personal pro	operty					
99 Other inv	vestment income					-	
100 Gain or (	(loss) from sales of assets other tha	n inventory					
101 Net incoi	me or (loss) from special events						
	rofit or (loss) from sales of inventory						
	venue a		-			÷ -	
θ							
104 Subtotal	(add columns (B) (D), and (E))	L		0		0	3,943
105 Total (ad	dd line 104, columns (B) (D), and (E	Ξ))				<b>-</b>	3,943
	i plus line 1d, Part I, should equal th						
Part VIII	Relationship of Activition						
Line No	Explain how each activity for which				mportant	ly to the accomplishme	ınl
•	of the organization's exempt purp	oses (other than by pro	oviding funds	for such purposes)			
N/A							<del>.</del> .
		<del></del>					
	leteres December 7				/0-	22 of the	
Part IX	Information Regarding T	(B)	ies and D	(C)	es (Sei		(E)
Name add	ress, and EIN of corporation	Percentage of	_ N	lature of activities		(D) Total income	End-òf-year
	ship or disregarded entity	ownership interest	0/				assets
10	/A		%				<del></del>
			%	<del>_</del>			
			0/	<del></del>	_		<del></del>
Part X	Information Regarding T	ranefare Associa	tod with F	Personal Renefit	Contra	Cts /See page 33 of th	ne instructions )
	he organization, during the year receive						Yes X No
	the organization, during the year, pa	•		aniunis on a personal och	on comme	at I	T TES PA NO
	es" to (b), file Form 8870 and Form		\				
11010 11 1	Under penalties of perjury I declare that	1/ /					
	and belief it is true correct, and comple	, , ,	/				
Please	N See O		$\prec$				
Sign	Signature of efficer		)				
Here	* Robert LH	HAROING-					
	Type or print name and title						
	Preparers	1	0.1-				
Paid	signature / Mulh	4. Zw C	PA				
Preparer's		LEY & TOLA					
Use Only	if self-employed), 32	ORANGE STR	EET				
	address and ZIP + 4 ASH	EVILLE, NC	288				

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

501(n), or Section 4947(a)(1) Nonexempt Charitable 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 Christian World Foundation 57-1046124 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 (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation employee ben plans & account and other than \$50,000 per week devoted to position deferred compensation allowances None 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 instr\_List each one (whether individuals or firms) If there are none, enter "None ") (c) Compensation (a) Name and address of each independent contractor paid more than \$ 50 000 (b) Type of service None Total number of others receiving over \$50,000 for

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Schedule A (Form 990 or 990-EZ) 2002

professional services

Sche	edule A (Form 990 or 990-EZ) 2002 Christian World Foundation 57-10	<u>46124</u>	P	age 2
Pa	Part III Statements About Activities (See page 2 of the instructions )		Yes	No
1	During the year, has the organization attempted to influence national state, or local legislation, including any		_	
	attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1		X
	or incurred in connection with the lobbying activities	8,		
	Part VI-A, or line I of Part VI-B )			Ì
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			
	organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of			
	the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any		1	
	substantial contributors, trustees, directors, officers creators, key employees, or members of their families, or			
	with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			
	owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the			
	transactions )			
а	Sale, exchange, or leasing of property?	2a	-	X
b	Lending of money or other extension of credit?	26	,	Х
~	Lending of Money of Guide Cateriological action			
c	Furnishing of goods, services, or facilities?	<u>2c</u>	<u> </u>	X
d	Payment of compensation (or payment or reimbursement of exp. if more than \$1 000)?	2d		X
٠	1 syment of compensation (of payment of telliburselliers of exp. 1 more verify 1 coopy			
e	Transfer of any part of its income or assets?	2е	,	X
3	Does the organization make grants for scholarships, fellowships, student loans etc ? (See Note below )	3		X.
3 4	Do you have a section 403(b) annuity plan for your employees?	4	<del>                                     </del>	X
	e Attach a statement to explain how the organization determines that individuals or organizations receiving grants	-		1 11
	pans from it in furtherance of its charitable programs "qualify" to receive payments			
	art IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions )			
	organization is not a private foundation because it is (Please check only ONE applicable box )			
5	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)			
6	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	A Federal state or local government or governmental unit Section 170(b)(1)(A)(v)			
9	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's na	me, city,		
	_ and state ▶			
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(	(b)(1)(A)(iv)		
11a	(Also complete the Support Schedule in Part IV-A)  An organization that normally receives a substantial part of its support from a governmental unit or from the general public	;		
	Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
11b	A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gri	oss		
	receipts from activities related to its chantable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/39			
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses a			
	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization	itions		
	described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6) if they meet the test of section 509(a)(2) (S	ee		
	section 509(a)(3) )			
	Provide the following information about the supported organizations (See page 5 of the instructions.)			
	(a) Name(s) of supported organization(s)	(b) Line	numbe above	r
		1,011	. 0.5046	—
		1	.2	
				_
14	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			

Page 3

	rt IV-A 'Support Schedule						ting	
	You may use the worksheet in the ins	structions		1				<del></del>
Caler	idar year (or fiscal year beginning in)	<u> </u>	(a) 2001	(b) 2000	(c) 1999	(d) 1998		(e) Total
15	Gifts grants, and contributions							
	received (Do not include unusual							
	grants See line 28 )	<del> </del>				_		
16	Membership fees received			-	-			
17	Gross receipts from admissions merchand							
	sold or services performed, or furnishing of							
	facilities in any activity that is related to							
	the organization's chantable etc purpose	-			<del>  -</del> -	-	<del> -</del>	<del></del>
18	Gross inc. from int , dividends, amounts received from pyrit, on securities							
	loans (section 512(a)(5)), rents royalties &							
	unrelated busin taxable inc (less							
	sec 511 taxes) from businesses acquired							
19	by the organization after June 30 1975  Net income from unrelated business	-			-			
19								
20	activities not included in line 18				<del>"</del>	_		· · · · · · · · · · · · · · · · · · ·
20	Tax revn levied for the organization's ben	,						
21	& either paid to it or expended on its behalf The value of serv or fact furnished to the							-
41	org by a governmental unit without charge							
	Do not incluthe value of servior facigen- erally furnished to the public without charge	.						
22	Other income Attach a schedule Do not	<del>'  </del>				<del></del>		·
	include gain or (loss) from sale of cap assets							
23	Total of lines 15 through 22			<del> </del>	<u>"</u>			
24	Line 23 minus line 17							
25	Enter 1% of line 23							
26	Organizations described on lines 1	10 or 11	a Enter 2%	of amount in column (e	e) line 24	<u> </u>	26a	
b c d	Prepare a list for your records to show governmental unit or publicly support amount shown in line 26a <b>Do not file</b> Total support for section 509(a)(1) ter Add Amounts from column (e) for line	ed organi e this list st Enter li	zation) whose tota with your return	al gifts for 1998 through Enter the total of all to )	2001 exceeded the	<b>&gt;</b>	26b 26c	
Ū	The Following Holl Colonial (c) for min		22			•	26d	
	Public support (line 26c minus line 26					•	26e	
f	Public support percentage (line 26		ator) divided by	line 26c (denominato	r))	•	26f	9/
27	Organizations described on line 12			ded in lines 15, 16, and				-
	person," prepare a list for your record							
	Do not file this list with your return	n Enter th	e sum of such an	nounts for each year				N/F
	(2001)	(2000)		(1999	9)	(19	98)	
þ	For any amount included in line 17 th	at was red	ceived from each	person (other than "dis	qualified persons"), pr	epare a list for you	ır records	to
	show the name of, and amount receive	ved for ea	ch year, that was	more than the larger of	of (1) the amount on lin	e 25 for the year o	or (2) \$5,0	000
	(include in the list organizations desc	ribed in fir	nes 5 through 11,	as well as individuals )	Do not file this list w	vith your return /	After com	puling
	the difference between the amount re	ceived ar	nd the larger amou	unt described in (1) or (	(2), enter the sum of th	iese differences (t	he exces	
								N/A
	amounts) for each year							
		(2000)		(1999	9)	(19	98)	
c	amounts) for each year		15	(1999) 16	9)	(19	98)	
c	amounts) for each year (2001)		20	16 21	9)	(19 <b>▶</b>	98)	
c	amounts) for each year (2001) Add Amounts from column (e) for lin			16 21	9)	(19 <b>&gt;</b>	27c	
c d e	amounts) for each year (2001) Add Amounts from column (e) for lin 17 Add Line 27a total Public support (line 27c total minus lin	ne 27d tot	and line 2	16 21 27b total		(19 <b>)</b> •	27c	
c d e f	amounts) for each year (2001) Add Amounts from column (e) for lin 17 Add Line 27a total Public support (line 27c total minus lin Total support for section 509(a)(2) te	ne 27d tot	20 and line 2 al) imount on line 23	16 21 21	<b>▶</b> [27f ]	(19 <b>&gt; -</b>	27c 27d 27e	
e f	amounts) for each year (2001) Add Amounts from column (e) for lin 17 Add Line 27a total Public support (line 27c total minus lin	ne 27d tot st Enter a	and line 2 al) amount on line 23 ator) divided by	16 21 21 7b total column (e) line 27f (denominator	<b>▶</b> [ 27f ]	(19 <b>&gt; &gt; &gt;</b>	27c	9/

57-1046124 Christian World Foundation\_ Page 4 Schedule A (Form 990 or 990-EZ) 2002 Private School Questionnaire (See page 7 of the instructions ) Part V (To be completed ONLY by schools that checked the box on line 6 in Part IV) Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, N/A Yes No 29 other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its 30 brochures, catalogues, and other written communications with the public dealing with student admissions, 30 programs and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during 31 the period of solicitation for students, or during the registration period if it has no solicitation program, in a way 31 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) Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 32c with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) 33 Does the organization discriminate by race in any way with respect to 33a a Students' rights or privileges? b Admissions policies? 33b Employment of faculty or administrative staff? 33c 33d Scholarships or other financial assistance? 33e Educational policies? 33f Use of facilities? 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) Does the organization receive any financial aid or assistance from a governmental agency? 34a 34b

b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b, please explain using an attached statement

Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev

	chedule A (Form 990 or 990-EZ) 2002		<u>World Found</u>				<u> </u>		<u> 124                                      </u>	Page 5
I			g Public Charities							
_			ible organization the Check				N/A		rol" provisions app	
<u>Un</u>		Lobbying Expen	ditures	<u> </u>	you cale	(a) Affiliated gr	)		(b) To be complet for ALL election	ed
_		ures" means amounts							organization	<u> </u>
	Total lobbying expenditures to influence				36					
	Total lobbying expenditures to influence		ect lobbying)		37	<u> </u>			<del></del>	
	Total lobbying expenditures (add lines 3	86 and 37)			38					
	Other exempt purpose expenditures				39	<del></del>				
	Total exempt purpose expenditures (ad				40					
41	Lobbying nontaxable amount Enter the									
	If the amount on line 40 is-		ontaxable amount is-							
	Not over \$500,000	20% of the amo			ľ					
	Over \$500,000 but not over \$1,000 000	•	5% of the excess over \$							
	Over \$1,000,000 but not over \$1 500 00	•	0% of the excess over \$		41	<del></del>				
	Over \$1,500,000 but not over \$17,000,0	• •	% of the excess over \$1	500 000						
	Over \$17,000,000	\$1,000,000		الـ	4.0					
	Grassroots nontaxable amount (enter 2	•			42					
	Subtract line 42 from line 36 Enter -0-				43	<del></del>				
44	Subtract line 41 from line 38 Enter -0- i	r line 41 is more than lii	ne 38		44					
	A A MAIN AND A A A A A A A A A A A A A A A A A				ľ					
	Caution If there is an amount on either			· Cootion	E04/L	<u></u>				
			ging Period Unde		•	-		1		
	· -		01(h) election do not hav			tine live colu	mns be	IOM		
_	See the in	structions for lines 45 t	hrough 50 on page 11 o	tine instruct	ions )					
			Lobbying Exp	enditures D	uring 4	4-Year Avera	iging P	eriod		
	Calendar year (or	(a)	(b)	(c	)		(d)		(e)	
	fiscal year beginning in)	2002	2001	200	0		1999		Total	
<u>45</u>	Lobbying nontaxable amount									
46	Lobbying ceiling amount (150% of									
	line 45(e))					_				
47	Total lobbying expenditures									
<del></del>	rotar lossying experiatures						<del></del>		<u></u>	
<u>48</u>	Grassroots nontaxable amount								_	
49	Grassroots ceiling amount (150% of									
	_line 48(e))									
	Grassroots lobbying expenditures	<u> </u>								
1	Part VI-B Lobbying Activity	•		1-1- D-4		<b>40</b>				
_			s that did not comp			(See pag	e 11 (	or the	instr)	N/P
	iring the year, did the organization attemp		-		ıy		Yes	No	Amount	
atte	empt to influence public opinion on a legis	slative matter or referer	ndum, through the use o	t			$\vdash$			
8	a Volunteers						-			
t	b Paid staff or management (include co	mpensation in expense	es reported on lines c th	rough h )			-			
	c Media advertisements						$\vdash \vdash$			
C	d Mailings to members, legislators, or the	=					$\vdash$			
	Publications, or published or broadca									
f							$\vdash$	-		
	g Direct contact with legislators, their st							-		
ŀ	h Rallies, demonstrations, seminars, co		ectures, or any other me	eans			$\vdash$			_
i	Total lobbying expenditures (add lines								L	
	If "Yes" to any of the above also atta-	an a statement giving a	detailed description of t	ne lobbying	activitie					2002

• • • • • • • • •	. <b>.</b>	000 000 57\ 2002	Chra	sting World Found	lation 57-104612	) Л	В	age 6
Part VII		990 or 990-EZ) 2002 Information Rega		stian World Found	s and Relationships With Noncharitat		<u> </u>	aye o
				e page 12 of the instruction				
1 Did th					h any other organization described in section			
501(c	) of the	Code (other than section	on 501(c)(3)	organizations) or in section 527, re	lating to political organizations?			
a Trans	fers fro	m the reporting organia	zation to a no	onchantable exempt organization of			Yes	No
(i)	Cash					51a(ı)	ļ	X
(ii)	Other	assets				a(11)	<del> </del>	<u>X</u>
<b>b</b> Other								١,,
		•		haritable exempt organization		b(i)	├	X
٠,		ases of assets from a n				b(II)		X
• •		of facilities, equipment iursement arrangement		sets		b(III) b(Iv)	<del> </del>	X
• •		or loan guarantees	ıa			b(v)		X
		-	embership o	or fundraising solicitations		b(vi)		X
			-	er assets or paid employees		С		Х
					(b) should always show the fair market value of the	1е	-	
goods	, other	assets, or services giv	en by the re	porting organization. If the organization	tion received less than fair market value in any			
transa	ction o	r sharing arrangement	show in col	umn (d) the value of the goods other	er assets, or services received			
(a)		(b)		(c)	(d)			
Line no		Amount Involved	Name of	nonchantable exempt organization	Description of transfers transactions and shari	ng arrangem	ents	
N/A								
				<del></del>	· · · · · · · · · · · · · · · · · · ·			-
		•	-					
<del></del>			-	3 <del></del>				
					<del></del>			
				·				-
		· · · · · ·						
<del></del>							_	
				<del></del>				
				with, or related to, one or more tax-			es 🛭	d No
		section 501(c) of the C plete the following sch		nan section 501(c)(3)) or in section !	D2111	, n	62 V	y NO
D II TE	s, com	(a)	edule	(b)	(c)			
	,	Name of organization		Type of organization	Description of relationship			
N/A	•							
				<u></u>		_		
		<del></del>			· · · · · · · · · · · · · · · · · · ·			
				<u> </u>	<u> </u>			
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					-			
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				l	l			

## **Federal Statements**

FYE 12/31/2002

### Statement 1 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
Temp. Restricted Cont	68,221	68,221		
Unrestricted Contributions	10,000	10,000		
Bank/Finance Charges	1,188	1,188		
Reimbursed Expenses	136	136		
Program Development	459	459		
Total	\$ 80,004	\$ 80,004	\$ 0	\$ 0

#### Statement 2 - Form 990, Part III - Organization's Primary Exempt Purpose

The Organization's main purpose is to perform the functions of, and carryout the purposes of the Christian World Adoption, a South Carolina Non-Profit Corporation, and such other Non-Profit agencies organized for charitable purposes as the Board of Directors may determine.

#### Statement 3 - Form 990, Part III, Line e - Other Program Services

Program Service Expenses

40109 Christian World Foundation 57-1046124

# **Federal Statements**

4/17/2003 3 40 PM

FYE 12/31/2002

## Statement 4 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Yea <u>r</u>	 Year
Due to CWA Registration Fees	\$	\$ 1,584
Total	\$ 0	\$ 1,584