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

OMB No 1545-0047

2003

Open to Public benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements Department of the Treasury Internal Revenue Service Inspection For the 2003 calendar year, or tax year beginning and ending Please C Name of organization **Employer ID number** Check if applicable use IRS 57-1046124 Address change label or Christian World Foundation Telephone number Name change print or type. Number and street (or P O box if mail is not delivered to street address) Room/suite 828-693-7007 Initial return See 303 Seventh Avenue East Final return Accounting method: | Cash Specific City or town, state or country, and ZIP + 4 Accrual Other (specify) Amended return Instruc Hendersonville NC 28792 Application pending tions Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to section 527 organizations trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group return for affiliates? G Website: ► N/A H(b) If "Yes," enter number of affiliates Organization type H(c) Are all affiliates included? (check only one) ► X 501(c) (3) < (insert no) 4947(a)(1) or 527 (If "No," att a list See instr) Check here I If the organization's gross receipts are normally not more than \$25,000 H(d) Is this a separate return filed by an The organization need not file a return with the IRS, but if the organization received a organization covered by a group ruling? Group Exemption Number Form 990 Package in the mail, it should file a return without financial data Some states Check I if the organization is not required require a complete return. 350,579 to attach Sch B (Form 990, 990-EZ, or 990-PF) Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Part I Contributions, gifts, grants, and similar amounts received 343,505 Direct public support 1b b Indirect public support 1c C Government contributions (grants) 343,505 noncash \$ 343,505 Total (add lines 1a through 1c) (cash \$ d Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 3 Membership dues and assessments 7.074 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6a Gross rents 6b Less rental expenses Net rental income or (loss) (subtract line 6b from line 6a) 6c 7 Other investment income (describe Gross amount from sales of assets other (A) Securities (B) Other 8a than inventory 86 Less cost or other basis and sales expenses Gain or (loss) (attach schedule) SCANNED Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d Special events and activities (attach schedule) If any amount is from gaming, check here Gross revenue (not including \$ Pier contributions reported on line ta 9a Less direct expenses of than fundraising expenses 9b Net income or (loss) rom/special events (subtract line, 9b from line 9a) 9с Gross sales of inventory, less returns and applyances 10a 10a Less cost of good sold October attached less cost october attached less c 10c C Other revenue (from Part VII, line 103) 11 11 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c/10c, and 11) 350. 12 12 Ε 13 Program services (from line 44, column (B)) 13 b b 14 14 Management and general (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 15 8 16 Payments to affiliates (attach schedule) 16 17 Total expenses (add lines 16 and 44, column (A)) 17 71,887 18 278,692 18 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)) Other changes in net assets or fund balances (attach explanation)

19

456

863.

584,764

19

•		plete column (A) Columns			
Functional Expenses and section 4947	(a)(1) nor	exempt charitable trusts b	ut optional for others (See	page 22 of the instructions	3)
Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I.		(71) 1014	services	and general	(b) runaraising
22 Grants and allocations (attach schedule)					
(cash \$ cash \$	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24			_	
25 Compensation of officers, directors, etc	25				
26 Other salaries and wages	26				
27 Pension plan contributions	27				
28 Other employee benefits	28				<u> </u>
29 Payroll taxes	29				
30 Professional fundraising fees	30	1 005		1 005	
31 Accounting fees	31	1,925		1,925	
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34				_ -
35 Postage and shipping	35			- 1	<u></u>
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40	1,750	1,750		
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42				
43 Other expenses not covered above (itemize) a	43a	· · · · · ·			
b See Statement 1	43b	68,212	64,995	3,217	
C	43c				
d	43d				·
е	43e				
44 Total functional expenses (add lines 22 - 43) Organizations					
completing columns (B)-(D), carry these totals to lines 13-15	44	71,887	66,745	5,142	0
Joint Costs. Check ▶ 🔲 if you are following SOP 98-2					
Are any joint costs from a combined educational campaign and	fundrais	ing solicitation reported	I in (B) Program service	es?	▶ ☐ Yes ☒ No
If "Yes," enter (i) the aggregate amount of these joint costs \$, (ii) the amou	nt allocated to Program se	rvices \$	
(iii) the amount allocated to Management and general \$			nt allocated to Fundraising		
Part III Statement of Program Service Acc	omplis	shments (See pag	<u>je 25 of the instru</u>	ctions.)	
What is the organization's primary exempt purpose?					Program Service Expenses
▶ See Statement 2			.		(Required for 501(c)(3) &
All organizations must describe their exempt purpose achievem of clients served, publications issued, etc. Discuss achievement	ents in a	a clear and concise mai re not measurable. (Sec	nner State the number		(4) orgs , & 4947(a)(1) trusts, but optional for
organizations and 4947(a)(1) nonexempt charitable trusts must	also ent	er the amount of grants	s and allocations to other	ers)	others)
a The Organization supported					
which coordinated 210-220 a	dopt	ions of chi	ldren from		
8-10 foreign countries by c	oupl	es in the U	nited State	s.	
		(Grants and all	ocations \$		66,745
b					
				ļ	
		(Grants and all	ocations \$)	
c					
		(Grants and alle	ocations \$) !	
d		10.0o and am	 	/	
-					
		(Grants and alle	ocations \$,	
e Other program services (attach schedule) See Str	nt 3	(Grants and alle		1	
f Total of Program Service Expenses (should equal line 44				<u> </u>	66,745
DAA	,			······································	Form 990 (2003)

Part IV Balance Sheets (See page 25 of the instructions.)

	Note:	Where required, attached schedules and amounts with	nin the description	(A)		(B)
	,	column should be for end-of-year amounts only		Beginning of year	<u> </u>	End of year
	45	Cash-non-interest-bearing	į.	586,348	45	448,119
	46	Savings and temporary cash investments			46	204,242
]		1 1			
	47a	Accounts receivable	47a		45.	
	b	Less allowance for doubtful accounts	47b		47c	<u> </u>
	40-	Diadaga sagawahia	48a		}	
	48a b	Pledges receivable Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable	460]		49	_
	50	Receivables from officers, directors, trustees, and key	employees		43	
Α	""	(attach schedule)	Cimployees		50	
s	51a			·		
s	""	schedule)	51a			
θ	Ь	Less allowance for doubtful accounts	51b		51c	
t	52	Inventories for sale or use	(6.2)		52	
s	53	Prepaid expenses and deferred charges			53	
_	54	Investments-securities	► ☐ Cost ☐ FMV		54	
	55a	Investments-land, buildings, and				
		equipment basis	55a 147,023			
	ь	Less accumulated depreciation (attach				
		schedule) See Stmt 4	55b		55c	147,023
	56	Investments-other (attach schedule)	See Stmt 5		56	258,158
	57a	Land, buildings, and equipment basis	57a			
	b	Less accumulated depreciation (attach				
		schedule)	57b		57c	
	58	Other assets (describe			58	
	59	Total assets (add lines 45 through 58) (must equal lin	e 74)	586,348		1,057,542
L	60	Accounts payable and accrued expenses	-		60	.
i	61	Grants payable	ŀ		61	
a b	62	Deferred revenue	,		62	
i	63	Loans from officers, directors, trustees, and key emplo	yees (attach		_	
ļ		schedule)	<u> </u>		63	
i t	1 .	Tax-exempt bond liabilities (attach schedule)	ŀ		64a	<u></u>
i	c b	Mortgages and other notes payable (attach schedule) Other liabilities (describe See Stmt 6	, <u> </u>	1,584	64b 65	194,086
0 S	65	Other habilities (describe	- '	1,504	- 65	194,000
3	66	Total liabilities (add lines 60 through 65)		1,584	66	194,086
	-		and complete lines	1,001		121,000
	•••	67 through 69 and lines 73 and 74	and complete inte			
NF	67	Unrestricted		578,226	67	839,744
еu	68	Temporarily restricted	Ī	6,538	68	23,712
t n	69	Permanently restricted			69	
A	Orga	anizations that do not follow SFAS 117, check here	▶ ☐ and			
s B	•	complete lines 70 through 74				
s a	70	Capital stock, trust principal, or current funds			70	
e I ta	71	Paid-in or capital surplus, or land, building, and equipm	nent fund		71	
s n	72	Retained earnings, endowment, accumulated income,			72	
С	73	Total net assets or fund balances (add lines 67 throi	ugh 69 or lines			
о _е rs		70 through 72,	I			
. 2		column (A) must equal line 19, column (B) must equal	l line 21)	584 , 764		863,456
_	74	Total liabilities and net assets / fund balances (add	lines 66 and 73)	586,348	74	1,057,542

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.

DAA

	990 (2003)	Christian Worl			- +			.046124			Page -
Pa	rt IV-A	Reconciliation of Rev				Pa		Reconciliation of	•	-	
		Financial Statements					F	inancial Statem	ents	with Exp	enses per
		Return (See page 27	<u>of tl</u>	ne instructions.)	\perp		F	Return			
а		, gains, and other support			_	а	Total expenses	and losses per			
	per audited fir	nancial statements	a	350,57	<u> 79</u>		audited financial	statements		a	<u>71,887</u>
þ	Amounts inclu	uded on line a but not on				þ	Amounts include	ed on line a but not			
	line 12, Form	990					on line 17, Form	990			
(1)	Net unrealized	d gains on				(1)	Donated service	s and use			
	investments	\$	}				of facilities \$				
(2)	Donated serv	ices and use				(2)	Prior year adjust	tments		[
	of facilities	\$					reported on line	20,			
(3)	Recoveries of	fprior	l				Form 990 <u>\$</u>]	
	year grants	\$				(3)	Losses reported	on line 20,		1 .	
(4)	Other (specify	<i>(</i>)	1				Form 990 <u>\$</u>			! !	
			1			(4)	Other (specify)			i	
		\$									
	Add amounts	on lines (1) through (4)	b				<u>\$</u>				
			Ì				Add amounts on	lines (1) through (4)		_b	
С	Line a minus	line b	C	350,57	79	С	Line a minus line	e b		С	71 , 887
d	Amounts inclu	uded on line 12,				d	Amounts include	ed on line 17,		}	
	Form 990 but	not on line a:					Form 990 but no	ot on line a:]	
(1)	Investment ex	rpenses	ľ			(1)	Investment expe	enses		f I	
	not included of	on line					not included on l	ine			
	6b, Form 990	\$					6b, Form 990 \$				
(2)	Other (specify	,) ')				(2)	Other (specify)				
					- }						
		\$					\$				
	Add amounts	on lines (1) and (2)	d				Add amounts on	lines (1) and (2)		d	
е	Total revenue	per line 12, Form 990				е	Total expenses	per line 17, Form 990			
	(line c plus lin	e d)	е	350 , 57	79		(line c plus line c	d)	•	е	71,887
Pa	rt V Lis	st of Officers, Directors	s, T	rustees, and Key E	Ξmj	ploy	ees (List each o	one even if not compe	nsate	d, see page	27 of
	_the	instructions)									
					((B) T	itle and average r week devoted to	(C) Compensation (If not paid, enter	(D) empl	Contrib to oyee benefit s & deferred	(E) Expense account and other
		(A) Name and address			1100	iis pe	position	-0)	plans	s & deferred npensation	allowances
_Se	ee State	ement 7									
			_								
											<u> </u>
								:			
		-			_						
	_										
	· -										
		· 									
											1
75	Did any office	r, director, trustee, or key emp	love	e receive aggregate com	nper	nsatio	on of more than \$	100.000 from your			·
	-	and all related organizations, o								•	Yes X No
	•	h schedule-see page 28 of the			uu þ	J. J V IL	Joseph Inc Totale	. c.ga.neattorio.			03 25 140
	co, andc	concours see page 20 of the									
		**									

Form	990 (2003) Christian World Foundation 57-1046124		F	age (
	art VI Other Information (See page 28 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		Х
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	<u> </u>	X
	If "Yes," attach a conformed copy of the changes			
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	ļ	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a			ļ
	statement	79	<u> </u>	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		ļ	
	and check whether it is exempt or nonexempt	ł	•	
81a	Enter direct and indirect political expenditures See line 81 instructions 81a			,,
b	Did the organization file Form 1120-POL for this year?	81b	 	X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge		ļ	_V -
	or at substantially less than fair rental value?	82a	 	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
020	revenue in Part I or as an expense in Part II (See instructions in Part III) Did the organization comply with the public inspection requirements for returns and exemption applications?		X	
83a	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A			
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х
b b	If "Yes," did the organization include with every solicitation an express statement that such contributions	044		
	or gifts were not tax deductible? N/A	84b		ĺ
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A		-	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
-	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	33.0		
	received a waiver for proxy tax owed for the prior year			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			1
0	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its			
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax		[]	
	year? N/A	85h	<u> </u>	
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	4		
b	Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) orgs Enter a Gross income from members or shareholders 87a			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them) [87b]	\dashv		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
	partnership, or an entity disregarded as separate from the organization under Regulations sections			v
00-	301 7701-2 and 301 7701-3? If "Yes," complete Part IX 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under	88		X
89a	section 4911 O , section 4912 O , section 4955 O O O O O O O O O	1		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction	i		
b	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		Χ
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	(000		
Ŭ	sections 4912, 4955, and 4958			0
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			<u>~</u> .
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions)			
91	The books are in care of ▶ Robert Harding Telephone no ▶ 828	-693	-70	07
	Located at ▶ 303 7th Avenue East, Hendersonville NC ZIP+4 ▶ 28792			
92	Section 4947(a)(1) nonexempt charitable 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 (2003)

Part VII	Analysis of Income-Pro	<u>ducing Activities (</u>	See pag	e 33 of the instru	<u>ctions.)</u>	·	
Note: Enter	gross amounts unless otherwise		Unrelate	d business income	Excluded	by sec 512, 513, or 514	(E) Related or
ındıcated		But	(A) siness code	(B) Amount	(C) Exclusion	(D) Amount	exempt function
93 Program	service revenue		alliess code	Amount	code	Amount	ıncome
a					<u> </u>		
b					ļ		
е							
f Medicare	e/Medicaid payments						
	d contracts from government agenc	ies					
_	ship dues and assessments				i i		
	on savings and temporary cash inve	etmonte	-				7,074
	Is and interest from securities	Suiterus					1,014
		-		·	 		
	al income or (loss) from real estate						
	inced property	<u> </u>					
	-financed property	_					
	al income or (loss) from personal pr	operty			ļi		
	vestment income	ļ					
100 Gain or ((loss) from sales of assets other tha	n inventory			ļ		
101 Net inco	me or (loss) from special events						
102 Gross pr	rofit or (loss) from sales of inventory						
103 Other re	venue a						
	<u></u>						
θ	· · · · · · · · · · · · · · · · · · ·						
104 Subtotal	(add columns (B), (D), and (E))			0		0	7,074
	dd line 104, columns (B), (D), and (E)	=))				•	7,07 <u>4</u> 7,074
•	5 plus line 1d, Part I, should equal th	**	d 1			· –	7014
Part VIII	Relationship of Activitie			of Evernt Purno	ses (Se	e nage 34 of the	instructions)
	Explain how each activity for which						
Line No.					important	iy to trie accomplishine	лц
• · · · · · · · · · · · · · · · · · · ·	of the organization's exempt purp	oses (other than by prov	iaing tunas	tor such purposes)			
N/A							
						 -	
-				· · ·			
					- ′0	04.64	4 11 \
Part IX	Information Regarding Ta	į	s and Di	sregarded Entitle	s (See		
Name, add	(A) dress, and EIN of corporation,	(B) Percentage of	\ \ \ \	(C) Nature of activities		(D) Total income	(E) End-of-year
partner	ship, or disregarded entity	ownership interest	ļ				assets
N	/A	%	6				
		%	6				
		%	o o				
		%	ó	<u> </u>			
Part X	Information Regarding Tr	ansfers Associate	d with P	ersonal Benefit C	ontrac	ts (See page 34 of the	instructions)
	the organization, during the year, re						Yes X No
	the organization, during the year, pa		\				
	es" to (b), file Form 8870 and Form	• ^ /	··········				
NOLG. II 1	7 7 7	t I have examined this retur					
	Under penalties of perjuly, declare the and belief, it is true, correct, and complete the correct and corre						
Please	and belief, it is rue, contact, and comp	ete Decaration of preparer	100,000				
Sign	Jones .						
Here	Signature of officer	Hannin), _				
	1 Losert h	·/TYKUIN	ノし				
	Type of print name and title		/				
	Preparer's	101					
Paid	signature	A. W	, 4K				
Preparer's		LEY & TOLANÍ), P				
Use Only	` '	ORANGE STREE					
	, , ,	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 Supplementary Information-(See separate instructions.)

OMB No 1545-0047

Employer identification number

2003

Department of the Treasury Internal Revenue Service

Name of the organization ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

57-1046124 Christian World Foundation 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 & deferred compensation account and other than \$50,000 per week devoted to position 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 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 For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. Schedule A (Form 990 or 990-EZ) 2003

Sche	dule	A (Form 990 or 990-EZ) 2003 Christian World Foundation 57-1046124		<u>Р</u>	age 2
Pa	art II	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	Dur	ring the year, has the organization attempted to influence national, state, or local legislation, including any			
	atte	empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid			
	or II	ncurred in connection with the lobbying activities 🕨 \$ (Must equal amounts on line 38,			1
	Par	t VI-A, or line i of Part VI-B)	1	<u> </u>	X
		anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			
	_	anizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of			
		lobbying activities]	
2		ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any		İ	ŀ
		estantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or			
		n 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			
	tran	nsactions)			
а	Sale	e, exchange, or leasing of property?	2a		Х
b	Len	iding of money or other extension of credit?	2b		Х
С	Fur	nishing of goods, services, or facilities?	2c	<u> </u>	Х
d	Pay	ment of compensation (or payment or reimbursement of expiration if more than \$1,000)?	2d		X
					l
0	Tra	nsfer of any part of its income or assets?	2е		X
3a	Do	you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how			1
	•	determine that recipients qualify to receive payments)	3a	<u> </u>	X
3b		you have a section 403(b) annuity plan for your employees?	3b		X
4		you maintain any separate account for participating donors where donors have the right to provide advice			
	on t	the use or distribution of funds?	4		X
Pa	art I\	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The	orgar	nization is not a private foundation because it is (Please check only ONE applicable box)			
5	Ц	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)			
6	Ц	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	Ц	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III)			
8	Н	A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)			
9	Ш	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, cit	ty,		
		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)		
		(Also complete the Support Schedule in Part IV-A)			
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general public			
	_	Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
11b		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
		receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquire	d		
	_	by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)			
13	X	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations			
		described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See			
		section 509(a)(3))			
		Provide the following information about the supported organizations (See page 5 of the instructions)		_	
		(a) Name(s) of supported organization(s)	(b) Line n	umber	
		(=)amo(o) or oupported organization(o)	from a	bove	
			<u> </u>		
	~		12		
	\Box				
14	$\perp \perp$	An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)			

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Page 3 Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar year (or fiscal year beginning in) (a) 2002 (b) 2001 (d) 1999 (e) Total Gifts, grants, and contributions received (Do not include unusual grants See line 28) Membership fees received 16 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 Gross income from interest, dividends, amounts received from payment 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 Net income from unrelated business activities not included in line 18 20 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf 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 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 23 Line 23 minus line 17 Enter 1% of line 23 25 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 **b** Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test Enter line 24, column (e) 26c d Add Amounts from column (e) for lines 26d 260 e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" N/A Do not file this list with your return. Enter the sum of such amounts for each year (2002)(2001)(2000)(1999)b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess N/A amounts) for each year (1999)Add Amounts from column (e) for lines 27c d Add Line 27a total and line 27b total 27d Public support (line 27c total minus line 27d total) 27e ▶ 27f Total support for section 509(a)(2) test Enter amount on line 23, column (e) Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27q h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h

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

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	, , , , , , , , , , , , , , , , , , , ,	/A	Yes	No
	other governing instrument, or in a resolution of its governing body?	29		
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,			
31	programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	30	-	
31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way	İ	ŀ	ļ
	that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	-		
	, , , , , , , , , , , , , , , , , , ,			
			ļ	
		ŀ		
		į	ŀ	
32	Does the organization maintain the following			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	<u> </u>	
1	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis? Copies of all catalogues, brochures, appoundements, and other written communications to the public dealing	32b	 	
•	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
•	Copies of all material seed by the enganization of the beneat to be a seed to be a			
	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			
ě	a Students' rights or privileges?	33a		
	Admissions policies?	33b		
•	Autilissions policies	330		
	Employment of faculty or administrative staff?	33c		
(Scholarships or other financial assistance?	33d		
		}		
•	Educational policies?	33е		
1	Use of facilities?	33f		
	a Athletic programs?	33g		
,	Autheric programs	339		
ı	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
			ļ	
			ĺ	
•				
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement	340	- 	_
	a year and a second of the sec			
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	}	

Schedule A (Form 990 or 990-EZ) 2003

Publications, or published or broadcast statements Grants to other organizations for lobbying purposes

Total lobbying expenditures (Add lines c through h.)

Direct contact with legislators, their staffs, government officials, or a legislative body Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

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

Sche	dule A (Form 990 or 990-EZ) 2003 Christian World Foundation 57-104612	4	_ F	age
Pa	art VII	Information Regarding Transfers To and Transactions and Relationships With Nonchari	table		
		Exempt Organizations (See page 12 of the instructions.)			
51	Did the	e reporting organization directly or indirectly engage in any of the following with any other organization described in section			
	501(c)	of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		_	
а	Transf	ers from the reporting organization to a noncharitable exempt organization of		Yes	N
	(i) (Cash	51a(ı)		Χ
	(ii)	Other assets	a(ii)		X
b	Other	transactions			
	(i) :	Sales or exchanges of assets with a noncharitable exempt organization	b(i)		Χ

	(i)	Cash	51a(ı)	X
	(ii)	Other assets	a(ii)	X
b	Other	transactions		
	(i)	Sales or exchanges of assets with a noncharitable exempt organization	b(i)	Χ
	(ii)	Purchases of assets from a noncharitable exempt organization	b(ii)	_X
	(iii)	Rental of facilities, equipment, or other assets	b(iii)	 Χ
	(iv)	Reimbursement arrangements	b(iv)	X
	(v)	Loans or loan guarantees	_b(v)	 Χ
	(vi)	Performance of services or membership or fundraising solicitations	b(vi)	Χ
С	Sharır	ng of facilities, equipment, mailing lists, other assets, or paid employees	С	Χ

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any

(a)	(b)	show in column (d) the value of the goods, other (c)	(d)
Line no	Amount involved	Name of noncharitable exempt organization	Description of transfers, transactions, and sharing arrangements
N/A			
			, , , , , , , , , , , , , , , , , , ,

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

(a)	(b)	(c)
Name of organization	Type of organization	Description of relationship
N/A	<u> </u>	
·		
·		
		·
		· · · · · · · · · · · · · · · · · · ·

▶ ☐ Yes ☒ No

40109 Christian World Foundation

57-1046124

Federal Statements

4/6/2004 1:58 PM

FYE: 12/31/2003

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

Description	 Total Expenses	_	Program Service	_	Mgt & General	[Fund- Raising
	\$	\$		\$		\$	
Expenses							
Advertising	100		100				
Temp Restricted Contributions	52,841		52,841				
Unrestricted Constributions	11,804		11,804				
Program Development	250		250				
Bank Charges	1,504				1,504		
Professional Fees	1,550				1,550		
Property Taxes	 163	_		_	163		
Total	\$ 68,212	\$_	64,995	\$_	3,217	\$	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

4/6/2004 1:58 PM

FYE: 12/31/2003

Statement 4 - Form 990, Part IV, Line 55 - Investments in Land, Buildings, and Equipment

	Description							
		Beginni of Yea	ing ar	Accum Deprec		End of Year		Accum Deprec
Land								
		\$	\$ <u>_</u>		_ \$_	147,023	\$_	
Total		\$	0 \$_	··········	<u>0</u> \$	147,023	\$_	0

Statement 5 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
Construction in Process	\$	\$ 258,158	
Total	\$ 0	\$ 258,158	

Statement 6 - Form 990, Part IV, Line 65 - Other Liabilities

Description	eginning of Year	_	End of Year
Due to CWA:Registration Fees Construction Contract Payable Construction Line of Credit	\$ 1,584	\$	1,747 109,371 82,968
Total	\$ 1,584	\$	194,086

40109 Christian World Foundation

57-1046124 FYE: 12/31/2003

Federal Statements

Statement 7 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

ž	Name		Title	Average Hrs	
Comp	Benefits	Expenses		Address	City, State, Zip
Bob Harding			CFO/Sec		ON OIL:
Tomilee Harding			Director		
O Anita Thomas	o)	Acct Mgr		Hendersonville NC
	0	0	· -		Hendersonville NC
Bart Bıngnam 0	0	0	Member		Elwood IN
Jane Byrum	•	(Member		
O Ricki Carruth	O	0	Мешьег		Gastonia NC
0	0	0	1		Charleston SC
Terrence Fries			Member		
0	0	0			Myrtle Beach SC
Garry Green			Member		
0	0	0			Greenville SC
Susan Kilpatrick			Member		
0	0	0			Charleston SC
Leah Miller			Member		
0	0	0			Mt. Pleasant SC
Maria Moore			Member		
0	0	0			Hendersonville NC
Lynn Rathbun			Member		
0	0	0			Ithaca NY
Sandra Watkins			Member		
0	0	0			Greenville SC