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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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

	Α	For the 2009 ca	alendar ye	ear, or tax year beginning	nd ending	ending 12/31/2009						
	B	heck if applicable	Please	C Name of organization	CLEAN THE WORL	D FOUNDATION	N, INC.	D Employe	r identificati	ion numl	ber	
	□₽	ddress change	use IRS label or	Doing Business As				26-421248	7			
		lame change	print or	Number and street (or P O	box if mail is not delivered	to street address)	Room/su	te E Telephon	e number			
	X II	nitial return	type. See	8026 SUNPORT DRIVE	Ē		306	(407) 574-	8353			
	П 🔲	erminated	Specific				<u>, , , , , , , , , , , , , , , , , , , </u>					
	┌	mended return	Instruc- tions.	ORLANDO		FL 3280	9-8104	G Gross red	ceipts \$		7	745,439
1		pplication pending	FN	Name and address of princip	al officer		H(a)	ls this a group ret	um for affilia	tes?		X No
l			1	N SEIPLER 2533 CORB) FI 32828	1	Are all affiliates in		ì	Yes	一
		av avament atatu						If "No," attach a l		L Lactions)	168	
		ax-exempt statu			no) 4947(a)(1)	or 527			,	uctions)		
				ANTHEWORLD.ORG		- 1	H(c)	Group exemption	number -			
		orm of organization	ı XC	orporationTrustA	ssociation Other	<u> </u>	Year of for	mation 2009	M State	e of legal	domicile	FL
	Р	art I Su	ımmary									
		1 Briefly	describe	the organization's mission	on or most significant	activities: CLE	AN THE !	NORLD FOU	NDATION	I, INC.	COLL	ECTS
	_	AND R	ECYCLE	S SOAP, SHAMPOO, AN	ND OTHER HYGIEN	PRODUCTS DI	SCARDE	D BY THE H	OSPITALI	ITY IN	DUSTP	₹Y
ı	2			JCTS ARE SANITIZED A								
	r.	PARTI	IERS WI	TH OTHER NOT-FOR-P	ROFITS WHO HAVE	PRE-EXISTING	DISTRIB	UTION CHAI	NNELS FO	OR EFF	ICIEN	CIES.
	Š	2 Check	this box	▶ ☐ if the organization	n discontinued its op-	erations or dispos	sed of mo	re than 25%	of its net	assets		
	ص ص	3 Numbe	er of votin	ng members of the goverr	ning body (Part VI, lin	e 1a)			3			
	ties			pendent voting members					4			
	Activities & Governance			employees (Part V, line					5			
	¥	1		volunteers (estimate if n					6			
1		_		elated business revenue					7a			
		b Net un	related bu	usiness taxable income f	rom Form 990-T, line	<u>34</u>			<u> 7b </u>			
2010				and a secondar /Daniel VIIII I have d	11-3			Prior Year		Cur	rent Yea	
				nd grants (Part VIII, line 1			·					27,349
6	eun			e revenue (Part VIII, line :								18,090
· ·	Revenue			me (Part VIII, column (A)			·					
DEC	_			Part VIII, column (A), line			·	-				745 400
				dd lines 8 through 11 (must llar amounts paid (Part I)					0			45,439
SCANNED		14 Benefit	anu siini e naid to	or for members (Part IX	Solumbia (A), lines 1-	-3). (D)	-					
Z				compensation, employee			10)					
3	Ses			ndraising fees (Part IX, co			'''					-
Ü	Expenses	b Total fu	ındraisine	g expenses (Part IX, colu	ma COGDEN L	JT 10	510					
Ø	Ä	17 Other	expenses	(Part IX, column (A), line	es 11a-11d, 11f-24f)		**				7	733,636
i				. Add lines 13–17 (must e					0			33,636
		19 Reveni		xpenses. Subtract line 18					0			11,803
I.	je g						Beg	inning of Currer	t Year	End	d of Year	
I	sets alar	20 Total a	ssets (Pa	art X, line 16)					0			18,948
	A A	21 Total li	abilıtıes (I	Part X, line 26)					0			7,145
	şŞ	20 Total a 21 Total li 22 Net as:	sets or fu	ind balances. Subtract lin	ne 21 from line 20				0			11,803
	Pa		gnature									
				s of perjury, I declare that I have								
		and	i bellet, it is i	true, correct, and complete Deci	laration of preparer (other tr	ian officer) is based of	n all informa	tion of which prep	parer nas any	y knowied	ige	
		k	<	Som Ser	n				11	/15/20 ⁻	10	
	Sig	1 7	Signature	of officer			•	Date		113120	10	
	Hei	'e 🗽	•	N SEIPLER		F'	XECUTIV	'E DIRECTO	3			
				annt name and title	_							
1		Pre	parer's			Date	Check if		Preparer's	s identifyii	ng numb	er
	Paid	d sign	nature				self-	, ▶□	(see instruc	ctions)		
	Pre	parer's 	n's name (or	ur vours à		1 -	employe	<u> </u>				
	Use	A-1	elf-employed					EIN_	<u> </u>			
		add	ress, and Z	IP+4	 			Phone no	•			
	May	the IRS discu	iss this re	eturn with the preparer sh	nown above? (see ins	structions)					Yes	☐ No

۲â	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	CLEAN THE WORLD FOUNDATION, INC.'S MISSION IS TO COLLECT AND RECYCLE SOAP AND SHAMPOO PRODUCTS
	DISCARDED BY THE HOSPITALITY INDUSTRY. THROUGH THE DISTRIBUTION OF THESE AND OTHER DONATED
	HYGIENE PRODUCTS TO IMPOVERISHED PEOPLE OF THE WORLD, THE ORGANIZATION CAN PREVENT MILLIONS OF
	UNNESSARY DEATHS CAUSED BY HYGIENE RELATED ILLNESSES
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	anocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	· · · · · · · · · · · · · · · · · · ·
	IN A START-UP MODE FOR THE MAJORITY OF 2009, CLEAN THE WORLD SUCESSFULLY COLLECTED
	DISCARDED SOAP AND SHAMPOO PRODUCTS FROM HOTELS, RECYCLED AND SANITIZED THESE PRODUCTS
	AND DISTRIBUTED THEM TO IMPOVERISHED NATIONS
4b	(Code: 0) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
	•
4 -	(Code) \(\(\sum_{\text{proposed}} \\ \(\sum_{\text{proposed}} \\ \\ \(\sum_{\text{proposed}} \\ \\ \(\sum_{\text{proposed}} \\ \\ \(\sum_{\text{proposed}} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
4C	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
	•••••••••••••••••••••••••••••••••••••••
44	Other program services. (Describe in Schedule O.)
-u	
4-	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses \$ 704.736

Form 990 (2009) CLEAN THE WORLD FOUNDATION, INC 26-4212487 Page 3 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х 2 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, 4 Х Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Did the organization report an amount in Part X. line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," Did the organization, directly or through a related organization, hold assets in term, permanent, or 10 10 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. 12 X 12A Was the organization included in consolidated, independent audited financial statements for the tax No 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E......... 13 14a Χ **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 Χ

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

18

Х

17

18

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	1		
	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	l i		
	employees? If "Yes," complete Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
C	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	000		v
	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	28a		Х
D	Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	200		
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
00	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33	-	<u> </u>
34	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Χ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part		l	
	VI	37		<u> X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	
		Form	990	20091

Form 9	90 (2009) CLEAN THE WORLD FOUNDATION, INC. 26-42	12487	F	age (
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			l
_	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			Ī
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 0			<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
Ja	this return?	3a		x
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		 ^
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		х
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
_	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		.,
L	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	C.L.		
7	Organizations that may receive deductible contributions under section 170(c).	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
0	required?	7h_		
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	:		
	organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.	•		
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ł	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following.			
а	The governing body?	8a	Χ	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	Х	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990 [
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Χ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	_		
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► FL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	nly)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
	X Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of intere	st		
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	е		
	organization: ► SHAWN SEIPLER (407) 574-83			
	8026 SUNPORT DRIVE, SUITE 306, ORLANDO, FL 32809-8104			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees; and former such persons.

Check this box if the organization did not compe	ensate any curre	ent of	ice	r, d	lirec	ctor, o	r tr	ustee.		
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director		Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
SHAWN SEIPLER EXECUTIVE DIRECTOR	50			х	x			0	0	0
PAUL TILL MANAGING DIRECTOR	50.			х	X			0	0	. 0
WILLIAM LOWRY BOARD MEMBER	50.							0	0	0
OWEN CHASTAIN, CPA BOARD MEMBER	5.							3,850	0	0
	-									
								-		

Pa	rt VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	/ees	anc	Hig	jhes	t Co	mpensated Em	ployees (continu	ıed)	
	(A)	(B)			(0	C)			(D)	(E)			F)
	Name and title	Average	Po	sition			hat ap		Reportable	Reporta			nated
		hours per week	or d	Inst	Officer	ey	lengh High	Former	compensation from	compens from rela	ated		unt of her
			Individual trustee or director	nstitutional trust	įΫ	Key employee	Highest compensated employee	ब्	the organization	organiza (W-2/1099			nsation n the
			ام تق	nal tr		loye	le ä		(W-2/1099-MISC)			organ	ization elated
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<u>1b</u>	Total	<u></u>						. ▶	3,850		0		0
2	Total number of individuals (including but no		e list	ed a		e) wh	no re	ceive	ed more than \$1	00,000 in			
	reportable compensation from the organizat	ion			0					-		Yes	No
3	Did the organization list any former officer,	director or truste	e, k	ev er	nplo	vee.	or h	iahes	st compensated			100	+ 110
	employee on line 1a? If "Yes," complete Sci					· .					3		X
4	For any individual listed on line 1a, is the su	m of reportable	com	pens	atior	n and	d oth	er co	ompensation fro	m			
	the organization and related organizations g	reater than \$15	0,00	0? If	"Yes	s," co	ompl	ete S	Schedule J for si	ıch			
	ındıvidual			٠		• •					4	-	X
5	Did any person listed on line 1a receive or a	•							•				-
Sec	services rendered to the organization? If "Yo tion B. Independent Contractors	es, compiete se	criea	uie J	i ior :	sucn	per	son .	· · · · · · ·	· · ·	5		<u> </u>
1	Complete this table for your five highest con	npensated inder	end	ent c	ontra	acto	rs tha	at red	ceived more that	n \$100.00	0 of	-	
	compensation from the organization.												
	(A)								(B)			(C)	
	Name and business a	ddress	-						Description of serv	ices	Com	pensatio	
													0
		 .											0
													0
													0
2	Total number of independent contractors (in			d to	thos	e lis	ted a	bove	e) who received				
	more than \$100,000 in compensation from t	he organization	•				0					_	

Business Code

ol

0

0

745,439

10a Gross sales of inventory, less

11a

C

Miscellaneous Revenue

All other revenue

Total revenue. See instructions .

Total. Add lines 11a–11d

Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

16 Occupancy 2,000 1,600 200 200 200 17 Travel 2,025 1,620 202 203 2		All other organizations must complete column	(A) but are not red	quirea to complete	columns (B), (C), a	na (D).
Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21. 2 Grants and other assistance to individuals in the U.S. See Part IV, line 18 and 16. U.S. See Part IV, line 15 and 16. U.S. See Part IV, line 17. U.S. See Part IV, line 18. U.S. See Part IV, line 18. U.S. See Part IV, line 18. U.S. See Part IV, line 19. U.S. See Part V, line 19. U.S. See Part V, line 19. U.S. See Part				Program service	Management and	Fundraising
organizations in the U.S. See Part IV, line 21 . 0 Grants and other assistance to individuals in the U.S. See Part IV, line 12 . 0 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 12 . and 16 . 0 Benefits paid to or for members . 0 Compensation of current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, trustees, and key employees . 0 Compensation or current officers, directors, and section 403(b) employer contributions (include section 401(k) and section 403(b) employer contributions) . 0 Other salanes and wages. 0 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . 0 Other salanes and wages. 0 Other salanes and salan	1	Grants and other assistance to governments and				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 12 . 0 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . 0 4 Benefits paid to or for members . 0 5 Compensation not included above, to disqualified persons (as defined under section 4958(I)(1)) and persons described in section 4958(I)(1)) and section 4958(I)(1) and persons described in section 4958(I)(1)) and section 4958(I)(1) and section 4958(III and section 4958(•		0			
the U.S. See Part IV, Inne 22. Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, Inne 15 and 16. U.S. See Part IV, Inne 15 and 16. Benefits paid to or for members. Compensation of current officers, directors, rustless, and key employees. Compensation not included above, to disqualified persons (as defined under section 4958(f(1)) and persons described in section 4958(f(1)) and section 403(b) employer contributions) Other employee benefits Payroll taxes O Professional fundraising services. See Part IV, Inne 17 f Investment management fees. O Cuber and the distribution of the promotion of the promot	2	· •				· · · · · · · · · · · · · · · · · · ·
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16. 0 0	_		0			
organizations, and individuals outside the U.S. See Part IV, Ines 17 o Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(I)(1)) and persons (as defined under section 4958(I)(1) and persons (as defined under section 4958(I) and persons (as defined unde	3	The state of the s				
U.S. See Parl IV, lines 15 and 16. 0	•	•				
Benefits paid to or for members 0			0			
5 Compensation of current officers, directors, trustees, and key employees	4					
trustees, and key employees.		· · · · · · · · · · · · · · · · · · ·		- · - · · -		
6 Compensation not included above, to disqualified persons (as defined under section 4958(p(1)) and persons described in section 4958(p(3)(B) 0 7 Other salanes and wages 0 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 9 Other employee benefits 0 10 Payroll taxes 0 11 Fees for services (non-employees): a Management 0 b Legal 2,157 2,157 Accounting 4,900 4,900 d Lobbying 0 9 Professional fundraising services. See Parl IV, line 17 0 10 Investment management fees 0 12 Advertising and promotion 5,898 5,898 13,670 3,670 3,670 14 Information technology 13,633 13,361 136 136 15 Royalties 0 16 Occupancy 2,000 1,600 200 200 17 Travel 2,000 1,600 200 200 17 Travel 2,000 1,600 200 200 200 17 Travel 2,000 1,600 200 200 200 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 3,202 3,203 10 Interest 0 10 PERATIONS-PICKLUP & RECYCLE 3,053 3,053 3,053 10 PERATIONS-PICKLUP & RECYCLE 3,003 3,053 0 10 PERATIONS-	•	·	o			
persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B). 0 7 Other salanes and wages. 0 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 9 Other employee benefits. 0 10 Payroll taxes 0 11 Fees for services (non-employees): a Management. 0 b Legal 2,157 2,157 c Accounting. 4,900 4,900 d Lobbyring. 0 e Professional fundraising services. See Part IV, line 17 for linvestment management fees. 0 g Other. 0 Advertising and promotion. 5,898 3,5898 3,670 3,670 13 Information technology 13,633 13,361 136 136 136 0 30 0 0 10 0 0 0 11 Fees for services (non-employees): a Management. 0 b Legal 2,157 2,157 c Accounting. 4,900 4,900 d Lobbyring. 0 e Professional fundraising services. See Part IV, line 17 for linvestment management fees. 0 g Other. 0 Advertising and promotion. 5,898 3,5898 7 S,898 3,5898 7 S,898 3,5898 7 S,898 3,5898 7 S,898 3,5898 8 S,898 3,5898 8 S,898 3,5898 9 S,898 3,5898	6					
persons described in section 4958(c)(3)(B)	•					
7 Other salanes and wages 8			0			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 10	7				-	
and section 403(b) employer contributions) Other employee benefits Degive the services (non-employees): A Management Degive the services (non-employees): De			•			· ·
9 Other employee benefits 0 0	_		o			
10 Payroll taxes	9	· · · · · · · · · · · · · · · · · · ·				
11 Fees for services (non-employees): a Management						
a Management .			-		- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
b Legal		· · · · · · · · · · · · · · · · · · ·	o			
c Accounting 4,900 4,900 d Lobbyring 0 e Professional fundraising services. See Part IV, line 17 0 f Investment management fees 0 g Other 0 24 Advertising and promotion 5,898 33 670 3,670 14 Information technology 13,633 13,361 136 15 Royalties 0 0 16 Occupancy 2,000 1,600 200 200 17 Travel 2,025 1,620 202 203 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 200 200 19 Conferences, conventions, and meetings 32,026 25,621 3,202 3,203 20 Interest 0 0 0 0 0 21 Payments to affiliates 0 0 0 0 22 Depreciation, depletion, and amortization 0 0 0 0 23 Insurance 3,053 3,053 3,053 24 Other expenses Itemize expenses not covered above. (Expenses spouped together and labeled miscellaneous may not exceed			-		2.157	
d Lobbying	_					
e Professional fundraising services. See Part IV, line 17	d				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
f Investment management fees 0 0 0 1			0			
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Advertising and promotion 5,898 5,898 3,670 3,670 3,670 1	a		_			
13 Office expenses	_		5,898			5.898
14 Information technology 13,633 13,361 136 136 15 Royalties 0 0 200 200 200 16 Occupancy 2,000 1,600 200 200 17 Travel 2,000 1,600 202 203 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0					3.670	<u> </u>
15 Royalties 0				13.361		136
16 Occupancy 2,000 1,600 200 200 17 Travel 2,025 1,620 202 203 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 32,026 25,621 3,202 3,203 10 Interest 0 0 1 21 Payments to affiliates 0 0 22 Depreciation, depletion, and amortization 0 0 0 0 0 0 0 23 Insurance 3,053 3,053 3,053 24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a OPERATIONS-PICK-UP & RECYCLE 33,053 33,053 5 b OPERATIONS-FIELD DISTRIBUTION 18,915 18,915 0 c OPERATIONS-AWARENESS & EDUCATION 28,202 28,202 d FACILITIES & EQUIPMENT 8,703 6,963 870 870 E HYGIENE PRODUCT DISTRIBUTION-IN KIND 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 575,401 579,401	15					
17 Travel 2,025 1,620 202 203 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 19 Conferences, conventions, and meetings 32,026 25,621 3,202 3,203 20 Interest 0 0 0 0 21 Payments to affiliates 0 0 0 0 0 22 Depreciation, depletion, and amortization 0 0 0 0 0 3 Insurance 3,053 3,053 3,053 24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 20 OPERATIONS-PICK-UP & RECYCLE 33,053 33,053 0 3 DOPERATIONS-FIELD DISTRIBUTION 18,915 18,915 0 C OPERATIONS-AWARENESS & EDUCATION 28,202 28,202 0 d FACILITIES & EQUIPMENT 8,703 6,963 870 870 FACILITIES & EQUIPMENT 8,703 6,963 870 870 f All other expenses 0 0 0 0 0 0 0 0 0	16		2.000	1.600	200	200
18	17					
for any federal, state, or local public officials	18					
19 Conferences, conventions, and meetings			ol		į	
20 Interest 0 21 Payments to affiliates 0 22 Depreciation, depletion, and amortization 0 0 0 0 23 Insurance 3,053 3,053 3,053 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 33,053 33,053 a OPERATIONS-PICK-UP & RECYCLE 33,053 33,053 b OPERATIONS-FIELD DISTRIBUTION 18,915 18,915 c OPERATIONS-AWARENESS & EDUCATION 28,202 28,202 d FACILITIES & EQUIPMENT 8,703 6,963 870 870 e HYGIENE PRODUCT DISTRIBUTION-IN KIND 575,401 575,4	19	Conferences, conventions, and meetings	32,026	25,621	3,202	3,203
21	20		0			<u> </u>
22 Depreciation, depletion, and amortization 0 0 0 0 23 Insurance 3,053 3,053 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 3 33,053 34,053 34,053 34,053 34,053 34	21	Payments to affiliates	0			
23 Insurance	22		0	0	0	0
Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a OPERATIONS-PICK-UP & RECYCLE 33,053 33,053 b OPERATIONS-FIELD DISTRIBUTION 18,915 18,915 c OPERATIONS-AWARENESS & EDUCATION 28,202 28,202 d FACILITIES & EQUIPMENT 8,703 6,963 870 870 e HYGIENE PRODUCT DISTRIBUTION-IN KIND 575,401 575,401 f All other expenses 0 5	23		3,053		3,053	
covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a OPERATIONS-PICK-UP & RECYCLE 33,053 33,053 5	24					
5% of total expenses shown on line 25 below.) a OPERATIONS-PICK-UP & RECYCLE 33,053 33,053 b OPERATIONS-FIELD DISTRIBUTION 18,915 18,915 c OPERATIONS-AWARENESS & EDUCATION 28,202 28,202 d FACILITIES & EQUIPMENT 8,703 6,963 870 870 e HYGIENE PRODUCT DISTRIBUTION-IN KIND 575,401 575,401 f All other expenses 0 25 Total functional expenses. Add lines 1 through 24f 733,636 704,736 18,390 10,510 26 Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising		covered above. (Expenses grouped together				
a OPERATIONS-PICK-UP & RECYCLE b OPERATIONS-FIELD DISTRIBUTION c OPERATIONS-AWARENESS & EDUCATION d FACILITIES & EQUIPMENT e HYGIENE PRODUCT DISTRIBUTION-IN KIND f All other expenses Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising						
b OPERATIONS-FIELD DISTRIBUTION c OPERATIONS-AWARENESS & EDUCATION d FACILITIES & EQUIPMENT e HYGIENE PRODUCT DISTRIBUTION-IN KIND f All other expenses Total functional expenses. Add lines 1 through 24f 26 Joint costs. Check here if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising		5% of total expenses shown on line 25 below.)				
c OPERATIONS-AWARENESS & EDUCATION d FACILITIES & EQUIPMENT e HYGIENE PRODUCT DISTRIBUTION-IN KIND f All other expenses Total functional expenses. Add lines 1 through 24f SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	а	OPERATIONS-PICK-UP & RECYCLE	33,053	33,053		
d FACILITIES & EQUIPMENT 8,703 6,963 870 870 e HYGIENE PRODUCT DISTRIBUTION-IN KIND 575,401 575,401 f All other expenses 0 25 Total functional expenses. Add lines 1 through 24f 733,636 704,736 18,390 10,510 26 Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	b	OPERATIONS-FIELD DISTRIBUTION	18,915	18,915		
e HYGIENE PRODUCT DISTRIBUTION-IN KIND f All other expenses Total functional expenses. Add lines 1 through 24f Joint costs. Check here If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	С		28,202	28,202	·	
f All other expenses D Total functional expenses. Add lines 1 through 24f Total functional expenses. Add lines 1 throu	d	FACILITIES & EQUIPMENT	8,703	6,963	870	870
Total functional expenses. Add lines 1 through 24f 733,636 704,736 18,390 10,510 26 Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	е	HYGIENE PRODUCT DISTRIBUTION-IN KIND	575,401	575,401		
Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	f	All other expenses	. 0			
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	25	Total functional expenses. Add lines 1 through 24f	733,636	704,736	18,390	10,510
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	26	Joint costs. Check here ▶ If following				
reported in column (B) joint costs from a combined educational campaign and fundraising		— •			ļ	
educational campaign and fundraising			ļ		}	
· • • • • • • • • • • • • • • • • • • •			}			
		· · · · · · · · · · · · · · · · · · ·				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 0 1 7,455 ol 2 2 3 Pledges and grants receivable, net. 0 3 0 4 4 4,557 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 7 Assets 8 6,936 9 Prepaid expenses and deferred charges 9 Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D Less: accumulated depreciation 10b 0 10c 0 0 11 0 11 12 Investments—other securities. See Part IV, line 11 ol 12 0 Investments—program-related. See Part IV, line 11 ol 13 13 14 Intangible assets 0 14 0 Other assets. See Part IV, line 11 ol 15 0 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 18,948 16 17 Accounts payable and accrued expenses 17 7,145 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . ol 23 0 Unsecured notes and loans payable to unrelated third parties 0 24 24 0 Other liabilities. Complete Part X of Schedule D. 25 ol 25 0 Total liabilities. Add lines 17 through 25 ol 26 26 7.145 Organizations that follow SFAS 117, check here ► X and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 11,803 28 28 29 0 29 Organizations that do not follow SFAS 117, check here▶ and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 ol 33 11,803 Total liabilities and net assets/fund balances ol 34 18.948

Part	XI Financial Statements and Reporting			
	<u> </u>		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	5		
	Schedule O.			, - -
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	1		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	_	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		, '	
	<u>issued on a consolidated basis, separate basis, or both:</u>	<u> </u>		
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** CLEAN THE WORLD FOUNDATION, INC. 26-4212487 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 X An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross q receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated a | Type I **b** | Type II Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (iii) Type of organization (iv) Is the organization (vi) Is the (v) Did you notify (vii) Amount of (ii) EIN (i) Name of supported (described on lines 1-9) in col (i) listed in your the organization in organization in col support organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? Yes Yes Yes No No 0 0 Total

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Par					1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you checked	the box on line	9 5, 7, or 8 of	Part I.)			_
	ion A. Public Support	1 () 2225	4 \ 0000	() 000=	(1) 0000	() 0000 T	
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and			l			
	membership fees received. (Do not						
	include any "unusual grants.")					745,439	745,439
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	ıts behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	o	0	o	0	745,439	745,439
5	The portion of total contributions by each					. 10, 100	7 10, 100
	person (other than a governmental unit						
	or publicly supported organization)						
	included on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						745,439
	ion B. Total Support	 					
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	o	0	o	o	745,439	745,439
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						0
9	Net income from unrelated business						
	activities, whether or not the business is						_
40	regularly carried on						0
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)						0
11	Total support. Add lines 7 through 10.						0 745,439
12	Gross receipts from related activities, etc. (s	ee instructions)			12	745,439
13	First five years. If the Form 990 is for the o				[
13	organization, check this box and stop here						
						• • • • •	
	ion C. Computation of Public Support		11 1 34		 .	44	
14	Public support percentage for 2009 (line 6, c		-			14	0.00%
15	Public support percentage from 2008 Sched					15	0.00%
16a	33 1/3% support test-2009. If the organiza					· ·	
	and stop here. The organization qualifies as						
b	33 1/3% support test-2008. If the organiza						
	box and stop here. The organization qualific						
17a	10%-facts-and-circumstances test-2009.						
	or more, and if the organization meets the "f				•	•	
	the organization meets the "facts-and-circur		_	•			
b	10%-facts-and-circumstances test-2008.						
	or more, and if the organization meets the "f					•	
	the organization meets the "facts-and-circur	nstances" test.	The organizat	ion qualifies as	a publicly sup	ported organiza	ation . $ ightharpoonup$ 1

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Par				ion 509(a)(2)	•		
	(Complete only if you checked th	<u>ne box on line</u>	9 of Part I.)				
	tion A. Public Support	() aaa - T					
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					745 400	745.40
	ınclude any "unusual grants.")	+				745,439	<u>745,439</u>
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the organization's tax-exempt purpose						(
3	Gross receipts from activities that are not an						<u></u>
	unrelated trade or business under section 513						(
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	j					
5	its behalf					-	(
J	furnished by a governmental unit to the						
	organization without charge						(
6	Total. Add lines 1 through 5	0	0	0	0	745,439	745,439
7a	Amounts included on lines 1, 2, and 3		İ			1	
	received from disqualified persons						(
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the					ı	
_	amount on line 13 for the year	0				-	
С 8	Add lines 7a and 7b Public support (Subtract line 7c from		0	0	0	0	
Ū	line 6.)						745,439
Sec	tion B. Total Support	•	•			<u></u>	
Cale	endar year (or fiscal year beginning in) 🕨 📗	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	o	o	0	o	745,439	745,439
10a					<u>-</u>		
	payments received on securities loans,]					
	rents, royalties and income from similar						_
b	sources						(
D	section 511 taxes) from businesses						
	acquired after June 30, 1975	i					(
С	Add lines 10a and 10b	0	0	0	0	0	(
11	Net income from unrelated business					1	
	activities not included in line 10b, whether or not the business is regularly					j I	
	carried on		1			1	(
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12)	ا	ا	ا		745,439	745 400
14	and 12.)		t second third	U	tay year as a		<u>745,439</u>
	organization, check this box and stop here .						
Sec	tion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, co		d by line 13, co	olumn (f))		15	0.00%
16	Public support percentage from 2008 Schedul					16	0.00%
Sec	tion D. Computation of Investment Inco						
17	Investment income percentage for 2009 (line	10c, column (f)	divided by line	e 13, column (1	·))	17	0.00%
18	Investment income percentage from 2008 Sch					18	0 00%
19a	33 1/3% support tests-2009. If the organizat						d line 17 is
L	not more than 33 1/3%, check this box and st						▶
b	33 1/3% support tests-2008. If the organization did line 18 is not more than 33 1/3%, check this box and						. ┌
20	Private foundation. If the organization did no		-			•	· · • -
20	ritrate touridation. If the organization did no	I CHECK & DOX	Jir IIIIC 14, 198	, or rap, check	ל מווס אטא מווט ל	see monucuons	· · · 🟲 🔼

Schedule A (Form	990 or 990-EZ) 2009	CLEAN THE	WORLD FOUN	IDATION, INC.	<u> </u>	26-4212487	Page 4
Part IV	Supplemental	Information.	Complete this	part to provid	de the explanations require	d by Part II, line 1	0:
	Part II line 17a	or 17h: and E	Part III lina 12	Provide any	other additional information	Soc instruction	· ,
 	raitii, iiile 17a	or 170, and r	ant in, inte 12	. Flovide any	other additional information	. See instructions	5.
						•	
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SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047
2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CLEAN THE WORLD FOUNDATION, INC.

Employer identification number

OLEA	IN THE WORLD FOUNDATION,	INC.		J20-4212	40/			
Par	Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Me	(d) thod of de revenu	terminin	g
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests .							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded.				<u> </u>			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,				Ì			
	or trust interests				<u> </u>			
12	Securities—Miscellaneous.							
13	Qualified conservation							
	contribution—Historic				1			
	structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial.							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy				<u> </u>			
22	Historical artifacts		-		<u> </u>			
23	Scientific specimens				<u> </u>			
24	Archeological artifacts				<u> </u>			
25	Other ► (SOAPS AND SH)	X	800	582,376	AVG W	HLSE F	RICE	<u>BY W</u>
26	Other ► ()		0	0				
27	Other ► ()		0	0	 			
28	Other ► ()		0	0	<u> 1 </u>			
29	Number of Forms 8283 received	by the or	rganization during the tax ve	ar for contributions for				
	which the organization complete	-	-		29			
			,				Yes	No
30 a	During the year, did the organiza	ation recei	ive by contribution any prope	erty reported in Part I, lines 1	1–28			
	that it must hold for at least thre							
	required to be used for exempt j	•				30a		
b	If "Yes," describe the arrangement	-	<u> </u>					
31	Does the organization have a gi			review of any non-standard				
	contributions?	-		-		31	•	
32 a	Does the organization hire or us					<u> </u>	-	
	noncash contributions?	•	_			32a		
ь	If "Yes," describe in Part II	- , -			. ,			
33	If the organization did not report	revenues	in column (c) for a type of p	roperty for which column (a)) is			
_	checked, describe in Part II.	,	· (-) · - · · · · · · · · · · · · · · · · ·	, ,				

Schedule M (F	orn 990) 2009 Pag	e 2
Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b,	
	32b, and 33. Also complete this part for any additional information.	
	•••••••••••••••••••••••••••••••••••••••	
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		- - -

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

CLEAN THE WORLD FOUNDATION, INC 26-4212487 Form 990 Part IV Section B Line 12C ON AN ANNUAL BASIS EACH OFFICER, DIRECTOR, AND ADVISOR ARE REQUIRED TO DISCLOSE, BY WRITTEN STATEMENT, ANY AND ALL POTENTIAL CONFLICTS OF INTEREST THAT THEY MAY HAVE. ANY DISCLOSURES ARE THEN MONITORED AND DISCUSSED BY THE BOARD AND THE EXECUTIVE DIRECTOR. IF ANY CONFLICTS OF INTEREST ARE DETERMINED TO EXIST, IMMEDIATE ACTION IS TAKEN TO ELIMINATE ANY CONFLICTS. THESE ACTIONS MAY INCLUDE BUT ARE NOT LIMITED TO DISSASSOCIATION BY EITHER CLEAN THE WORLD FOUNDATION, INC. OR THE RESIGNATION OF ANY OFFICER, DIRECTOR, OR ADVISOR IF THE CONFLICT CANNOT BE RESOLVED. Form 990 Part VI Section C Line 19 CLEAN THE WORLD FOUNDATION, INC. MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC BY MAKING THESE DOCUMENTS AVAILABLE UPON REQUEST.

Itam F /QC	Mame	and Addre	ace of Drin	cipal Officer
11em F (98	ivi - Name	and Addin	ess of Fill	icibal Unicer

tion 1 (000) Traine and Addices of 1 timelpar officer						
Name .		<u> </u>	Phone Number			
SHAWN SEIPLER			(407) 509-4110			
Address Foreign Country						
2533 CORBYTON CT						
City, Town, or Post Office	State	Zıp Code	Check ("X") if a business			
ORLANDO	FL	32828				

Part I, Lines 25-28 (Sch M (990)) - Other Types of Property

				Tarti, Lines 25-20 (Scri W (990)) - Other Types of Property							
1 1	Non-Cash		Number of	Revenues Reported	Method of Determining						
	Contribution		Contributions	on 990, Pt VIII, Line 1g	Revenues						
_1	X	SOAPS AND SHAMPOOS	800	582,376	AVG WHLSE PRICE BY W						
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
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