HURRICANE IDALIA (EM-3596-FL) EXTENDED TO FEBRUARY 15, 2024 | Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

B Groyest Common or organization CAPTAINS FOR CLEAN WATER INC	Α	For the	2022 calendar year, or tax year beginning and e	ending											
Number Contributions and grants (Part VIII, line 1h) Contributions and g			C Name of organization		D Employer identifi	cation number									
Number Contributions and grants (Part VIII, line 1h) Contributions and g		Addres	S CAPTAINS FOR CLEAN WATER INC												
Number and street (or P.D. box if mail is not delivered to street address) Rounvisute Rounvisute P.D. Box 1653 P.D.		Name			**_***99	69									
PO BOX 1653 Postero and address of principal officer DANIEL ANDREWS FORT MYERS, FL 33902 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33902 Forter methods address of principal officer DANIEL ANDREWS FORT MYERS, FL 33902 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33902 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33902 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33902 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33907 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33907 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33907 Forter methods of principal officer DANIEL ANDREWS FORT MYERS, FL 33907 Forter methods of principal officer DANIEL ANDREWS Forter methods of principal officer		Initial		E Telephone numbe	r										
City or town, state or province, country, and 2/P or foreign postal code PORT MYERS, FL 33902 FName and address of principal officer DANIEL ANDREWS SME AS C ABOVE FNAme and address of principal officer DANIEL ANDREWS SWEATH OF A STATE OF THE VISION OF TH		Final	,												
FORT MYERS, FL 33902		termin-			i										
Figure 2					H(a) Is this a group re	eturn									
Taxe-exempt status:		tion	F Name and address of principal officer. DANTED ANDREWS		1										
J Website: WRWCAPTATINSFORCLEANWATER.ORG Hcj Group exemption number		pendin	SAME AS C ABOVE												
Rough Graganization: St. Corporation Trust Association Other L Year of formation: 2016 M State of legal domicile: PL	ı	Tax-exe		r 527	If "No," attach a	list. See instructions									
The property Summary Summary															
Biefly describe the organization's mission or most significant activities: TO RESTORE AND PROTECT AQUATIC ECOSYSTEMS FOR THE USE AND ENJOYMENT OF ALL. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of independent voting members of the governing body (Part VI, line 1b) 6 Total number of volunteers (estimate if necessary) 7 Total unrelated business revenue from Part VIII, column (C), line 12 5 Total unrelated business revenue from Part VIII, column (C), line 12 6 Total unrelated business revenue (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8d, ep. (to, and 1te) 12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), lines 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Benefits paid to or for members (Part IX, column (A), lines 12) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 25) 16 Professional fundraising ese (Part IX, column (A), lines 25) 17 Other expenses (Part IX, column (A), lines 12) 18 Total sepenses. Subtract line 18 from line 12 19 Revenue less expenses. Subtract line 18 from line 12 10 Total indraising expenses (Part IX, column (A), lines 25) 10 Total undraising expenses (Part IX, column (A), lines 25) 11 Total undraising expenses (Part IX, column (A), lines 25) 12 Total undraising expenses (Part IX, column (A), lines 25) 13 Total sepenses. Add lines 1317 (must equal Part IX, column (A), lines 25) 14 Total undraising expenses (Part IX, column (A), lines 25) 15 Total undraising expenses (Part IX, column (A), lines 25) 16 Total undraising expenses (Part IX, column (A), lines 25) 17 Total	K	Form of		L Year	of formation: 2016 n	M State of legal domicile: ${f FL}$									
Check this box	Р	_	-												
Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5	a	1			AND PROTECT	r AQUATIC									
Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5	2														
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8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), lines 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising fees (Part IX, column (A), line 1e) 17 Other expenses (Part IX, column (A), line 2f) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Preparer Use Only 8 Contributions and grants (Part X, Ine 26) 10 Date 10 Date 11 Charle (Part X, Ine 26) 11 13, 17116, 806. 12, 172. 1, 1942, 307. 13, 572, 307. 14 Benefits paid to refer the proper or print name and title 15 Primt's address 8 8010 SUMMERLIN LAKES DRIVE 16 Firm's address 8 8010 SUMMERLIN LAKES DRIVE 16 Form MYERS, FL 33907 17 Phone no. (239) 482–5522	_	В	Net unrelated business taxable income from Form 990-1, Part I, line 11	······											
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign	t As	ਸ਼੍ਰੂ 21 ਂ	Total liabilities (Part X, line 26)			187,786.									
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Daniel Andrews, Executive Director Type or print name and title Print/Type preparer's name Preparer MICHAEL DELUCA MICHAEL DELUCA Firm's name HILL, BARTH & KING LLC Firm's name HILL, BARTH & KING LLC Firm's address 8010 SUMMERLIN LAKES DRIVE FORT MYERS, FL 33907 Phone no. (239) 482-5522	2	∄ 22 ∣	Net assets or fund balances. Subtract line 21 from line 20		1,810,987.	3,334,450.									
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FORT MYERS, FL 33907 Phone no. (239) 482-5522		· .			FITTI S EIN "	1443									
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	— M≥	ov the ID			[F HOHE HO. \ 4										

Pai	Statement of Program Service Accomplishments	
_	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	TO ADVANCE EDUCATION, AWARENESS, AND SCIENTIFICALLY SUPPORTED	OB 1 T B B
	SOLUTIONS TO RESTORE AND PROTECT MARINE ECOSYSTEMS AND OUR WAY	OF LIFE
	FOR FUTURE GENERATIONS	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	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?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to other section 501(c)(4) organizations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organization 501(c)(4) organizat	kpenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1,527,108. including grants of \$62,307.) (Revenue \$)
	COMMUNITY OUTREACH - EDUCATING FLORIDA'S RESIDENTS AND VISITORS	ON THE
	ISSUES FACING THE EVERGLADES AND ESTUARIES AND UNITING STAKEHOL	DERS TO
	ADVOCATE FOR LONG-TERM SCIENCE BASED SOLUTIONS FOR CLEAN WATER.	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
10	(Code:	
	Other program convices (Describe on Schodule O.)	
4d	Other program services (Describe on Schedule O.)	١
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 1,527,108.	
<u>4e</u>	Total program service expenses	Form 990 (2022)
		(2022)

Form 990 (2022) CAPTAINS FOR CLEAN WATER INC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	-10		
•••	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		11a	Х	
L	Part VI	I Ia	- 21	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total		Х	
اء	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Λ	
a	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			. v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	<u> X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
Ť	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			~~
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

232003 12-13-22

Form **990** (2022)

Part IV	Checklist of Required Schedules	(continued)
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	Continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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 employees? If "Yes," complete			
	Schedule J	23		X
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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
D	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	25b		Х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? f	28c		х
29	"Yes," complete Schedule L, Part IV 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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	254		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30	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			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			ـــــــــــــــــــــــــــــــــــــــ
_			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 26 Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable	-		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
·	(gambling) winnings to prize winners?	1c		

232004 12-13-22

Form 990 (2022) CAPTAINS FOR CLEAN WATER INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a 15 15 15 15 15 15 15 15						Yes	No				
the off or the calendary year ending with or within the year covered by this return 2 2 2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	2a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements.				100	110				
b If a least one is reported on line 2a, did the organization file all required federal employment fax returns? 2b If Yes, 1 has it filed a Form 990-T for this year? If Yes' 10 line 3b, provide an explanation on Schedule 0 3c X 3			2a	15							
3a Dt the organization have unrelated business gross income of \$1,000 or more during the year? 3b Dt 1f "Yes," fast it field a form 800 price for this year? If "No" to line 3b, provide an explanation on Schedule 0 4d 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)? See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). 5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Id "Yes" to line for 5c, 5d, of the organization that it was or is a party to a prohibited tax shelter transaction? 5c Id "Yes" of the financial have annual gross receipts that are normally greater than \$100,000, and did the organization society any contributions that were not tax deductibles of antibatello contributions? 7b Organizations that may receive deductible contributions under section 170(c). 8c Id Id "Yes," did the organization incide with every solicitation an express statement that such contributions orgitis were not tax deductibles a final party as a contribution and party for goods and services provided to the payor? 7c Organizations that may receive deductible contributions under section 170(c). 8d Id the organization neceive apparent in excess (STS made party as a contribution and party for goods and services provided to the payor? 7c Id Id the organization neceive apparent in excess (STS made party as a contribution of payon and payon and services provided? 7c Did the organization receive any princip, directly, to pay premiums on a personal benefit contract? 7d Id "Yes," indicate the number of Forms 8282 filed during the year? 7d Id the organization received a contribution of care, boats, ariplanes, or oth	b				2b	х					
b If Yes, "Inst if Ried a Form 980T for this year? If No' to file 3b, provide an explanation on Schedule O 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 accounts in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). See instructions for filing requirements for FinCSN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization file Form 88861? 5b If Yes, "to line Sa or 5b, did the organization file Form 88861? 6c If Yes' to line Sa or 5b, did the organization file Form 88861? 6d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8b If Yes, "did the organization notify the domor of the value of the goods: or services provided? 7c Did the organization sell, existing, or charvies dispose of tample personal property for which it was required to file Form 8882? filed during the year 6 Did the organization exceived a contribution of case dispose of tample personal property for which it was required to file Form 8882? filed during the year 6 Did the organization exceived a contribution of case dispose of tample personal property for which it was required? 8 To Did the organization exceived a contribution of case, books, any parena benefit contract? 9 Did the sponsoring organization		5111					Х				
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organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 In the organization is licensed to income than \$1.000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 X 17 In the imposition of an excise tax under section 4951, 4952 or 4953?											
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17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17	ю		r II ICO	IIIE?	10		<i>1</i> \				
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		\ti\/iti^	e							
	17				17						
					17						

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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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X					
Sec	tion A. Governing Body and Management										
					Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		8							
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent	1b		8							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other								
	officer, director, trustee, or key employee?			2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the										
				3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 99					Х					
5											
6	Did the organization have members or stockholders?			6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app										
	more members of the governing body?			7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto										
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year										
а	The governing body?	,	Ü	8a	Х						
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 reac										
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue	Code)			•					
					Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х					
	If "Yes," did the organization have written policies and procedures governing the activities of such cha										
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	X						
b											
12a											
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es." d	escribe								
	on Schedule O how this was done	<i>,</i>		120	X						
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14	X						
15	Did the process for determining compensation of the following persons include a review and approval										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official			15a	X						
	Other officers or key employees of the organization			15b		X					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent w	ith a								
	taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	zatior	's								
	exempt status with respect to such arrangements?			16b							
Sec	tion 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 (1024 or 1024-A, if applicable), 990, and	d 990	-T (section 501(c)(3	s)s only	availa	ble					
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website X Another's website X Upon request Other (explain	on Sc	hedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor		,	nd finar	ncial						
	statements available to the public during the tax year.		. ,,								
20	State the name, address, and telephone number of the person who possesses the organization's bool	ks and	d records								
	HILL BARTH & KING, LLC - 239-482-5522										
	8010 SUMMERLIN LAKES DRIVE, FORT MYERS, FL 33907										

Form **990** (2022)

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

Check if Schedule O contains a response or note to any line in this Part VII

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.
- 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, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r		orga	niza			nper	sat	ed any current officer, d	irector, or trustee.				
(A)	(B)		(C)					(D)	(E)	(F)			
Name and title	Average	(do			Position o not check more than one				one	Reportable	Reportable	Estimated	
	hours per					is bot or/trus		compensation	compensation	amount of			
	week (list any	-	T				T	from the	from related organizations	other compensation			
	hours for	direct				_		organization	(W-2/1099-MISC/	from the			
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization			
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,	and related			
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations			
(1) DANIEL ANDREWS	line) 40.00	Pu	lns	#	Ke	훈등	For						
EXECUTIVE DIRECTOR	40.00	┨		x				114,237.	0.	7,094.			
(2) CHRIS WITTMAN	40.00					\vdash		114,257.	0.	7,054.			
PROGRAM DIRECTOR	40.00	1		Х				93,057.	0.	0.			
(3) LELAND GARVIN	2.00							3370371	•				
SECRETARY		х		х				0.	0.	0.			
(4) BOB BEVILLE	2.00												
DIRECTOR		Х						0.	0.	0.			
(5) REID MCKINSTRY	2.00												
DIRECTOR		Х						0.	0.	0.			
(6) CHAUNCEY GOSS	2.00												
TREASURER		Х		Х				0.	0.	0.			
(7) DR. MICHAEL COLLINS	2.00												
DIRECTOR		Х				_		0.	0.	0.			
(8) WENDI PETERSON	2.00	1								_			
DIRECTOR		Х				_		0.	0.	0.			
(9) GENE NESBEDA	0.00	ļ		l									
CHAIRMAN		Х		Х		_		0.	0.	0.			
(10) CHRISTOPHER KELLY	0.00												
DIRECTOR	1	Х				_		0.	0.	0.			
		1											
	+					+							
		1											
						T							
		1											
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		4											
	1]					

Form **990** (2022)

Form 990 (2022) CAPTAINS									**_**	*996	9	Page 8
Part VII Section A. Officers, Directors, Trus		oloye	ees,			ghes	t Co	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	box,	not cl unles	ss per	ition more son is	than c s both r/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	n	(F) Estima amoun othe	t of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)	C/	from to from to organizati and relati organiza	he ation ated
										\perp		
										\perp		
										_		
										_		
										+		
										+		
										\perp		
1b Subtotal								207,294.		0.	7,0	94.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)	I, Section A							207,294.		0.	7,0	0.
Total number of individuals (including but n compensation from the organization								ceived more than \$100,	000 of reportable			1
3 Did the organization list any former officer,	director, trust	ee. k	ev e	emple	ove	e. or	hial	hest compensated emp	lovee on		Yes	No
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su	uch individual										3	X
and related organizations greater than \$150. 5 Did any person listed on line 1a receive or a),000? If "Yes,	" coi	mple	ete S	Sche	dule	J fo	or such individual			4	X
rendered to the organization? If "Yes," com					-			-		!	5	X
Complete this table for your five highest co the organization. Report compensation for	•	•							,	ensatior	n from	
(A) Name and business			NE			,, ,,,,,		(B) Description of s		Com	(C)	on
Total number of independent contractors (i \$100,000 of compensation from the organi.)	•	ot lin	nited	d to t	thos 0		ted :	above) who received mo	ore than		000	
										Fo	_{rm} 990	(2022)

232008 12-13-22

Form 990 (2022) CAPTAIN
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
() ()	1 /	a Federated campaigns 1a					
anta			38,615.				
Sign of			808,579.				
fts,		•	000,373.				
Contributions, Gifts, Grants and Other Similar Amounts							
ns, Sim		Government grants (contributions)					
er (1	All other contributions, gifts, grants, and	2 050 651				
현된		similar amounts not included above 1f	2,859,651.				
ont od (Noncash contributions included in lines 1a-1f 1g \$	80,752.	2 = 25 245			
<u>ğ</u> <u>ğ</u>		1 Total. Add lines 1a-1f		3,706,845.			
		•	Business Code				
9	2 8	a					
e Š	ŀ						
Se	(:					
am eve	(d b					
Program Service Revenue	•	e					
P	1	All other program service revenue					
	9	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interes	I				
		other similar amounts)		36,160.			36,160.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties	1				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
		b Less: rental expenses 6b					
		Rental income or (loss) 6c					
		d Not rental income or (loca)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	, ,		(11) 0 11 101				
		assets other than inventory Less: cost or other basis					
o l	•						
ň							
eve		()		F2 066		F2 066	
her Revenue		d Net gain or (loss)		-52,966.		-52,966.	
	8 8	a Gross income from fundraising events (not					
Ö		including \$ 808,579. of					
		contributions reported on line 1c). See	40 005				
		Part IV, line 18 8a	19,305.				
		Less: direct expenses 8b	244,920.				
		Net income or (loss) from fundraising events		-225,615.			-225,615.
	9 a	a Gross income from gaming activities. See	l				
		Part IV, line 19 9a					
		Less: direct expenses 9b					
	(Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns					
		and allowances 10a	234,256.				
	ŀ	Less: cost of goods sold 10b	169,541.				
	(Net income or (loss) from sales of inventory		64,715.	64,715.		
<u>"</u> T			Business Code				
Miscellaneous Revenue	11 a	a					
ne Due	ŀ						
ella	(
SC Be	(d All other revenue					
Σ		e Total. Add lines 11a-11d					
	12	Total revenue. See instructions		3,529,139.	64,715.	-52,966.	-189,455.

232009 12-13-22

Form **990** (2022)

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 22,307. 22,307. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 40,000. 40,000. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 207,294. 186,564. 10,365. 10,365. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 608,865. 456,639. 84,510. 67,716. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 73,364. 57,575. 8,905. 6,884. Other employee benefits 9 85,246. 64,210. 14,535. 6,501. 10 Payroll taxes 11 Fees for services (nonemployees): Management 31,549. 31,549. Legal 60,109. 60,109. Accounting Lobbying Professional fundraising services. See Part IV, line 17 4,812. 4,812. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 166,710. 18,960. 75,750. 72,000. column (A), amount, list line 11g expenses on Sch O.) 73,924. 73,924. Advertising and promotion 12 46,054. 43,115. 2,939. Office expenses 13 103,200. 94,363. 8,837. Information technology 14 15 Royalties 24,233. 24,233. 16 Occupancy 17,789. 17,789. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 64,378. 64,378. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 11,885. 11,885. Depreciation, depletion, and amortization 22 1,118. 64,020. 61,784. 1,118. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 84,682. 84,682. COMMUNITY EDUCATION & O RESEARCH STUDIES 66,528. 66,528. 42,835. 42,835. HURRICANE RELIEF 39,277. 39,277. d LOBBYING ACTIVITIES 3,020. 3,020. e All other expenses 1,942,081. 1,527,108. 246,639. 168,334. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

Form 990 (2022)

Check here

educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Form 990 (2022)
Part X | Balance Sheet

Pa	rt X	Balance Sheet						
		Check if Schedule O contains a response or	note to a	ny line in this Part X				
					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			391,373.	1	1,110,182.	
	2	Savings and temporary cash investments			1,094,509.	2	1,361,060.	
	3	Pledges and grants receivable, net			3			
	4	Accounts receivable, net	100,000.	4	69,730.			
	5	Loans and other receivables from any current						
		trustee, key employee, creator or founder, su						
		controlled entity or family member of any of t	hese pers	sons		5		
	6	Loans and other receivables from other disqu	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons describ	oed in se	ction 4958(c)(3)(B)		6		
ţ	7	Notes and loans receivable, net				7		
Assets	8	Inventories for sale or use			90,460.	8	211,909	
Ä	9	Prepaid expenses and deferred charges				9		
	10a	Land, buildings, and equipment: cost or othe	r					
		basis. Complete Part VI of Schedule D	10a	58,875. 34,673.				
	b	Less: accumulated depreciation			28,991.	10c	24,202	
	11	Investments - publicly traded securities			11			
	12	Investments - other securities. See Part IV, lin		12				
	13	Investments - program-related. See Part IV, lin	258,083.	13	693,604			
	14	Intangible assets	10001	14	54 540			
	15	Other assets. See Part IV, line 11			10,821.	15	51,549	
	16	Total assets. Add lines 1 through 15 (must e			1,974,237.	16	3,522,236	
	17	Accounts payable and accrued expenses			72,167.	17	140,726	
	18	Grants payable	00 000	18				
	19	Deferred revenue	90,000.	19	0 .			
	20	Tax-exempt bond liabilities				20		
	21	Escrow or custodial account liability. Comple				21		
es	22	Loans and other payables to any current or fo		I				
Liabilities		trustee, key employee, creator or founder, su				-00		
E.		controlled entity or family member of any of t				22		
	23	Secured mortgages and notes payable to uni				23		
	24	Unsecured notes and loans payable to unrela				24		
	25	Other liabilities (including federal income tax,						
		parties, and other liabilities not included on line of Schedule D			1,083.	25	47,060.	
	26	Total liabilities. Add lines 17 through 25		·····	163,250.	25 26	187,786.	
	20	Organizations that follow FASB ASC 958, or	heck he	e X	103/2301	20	1077700	
es		and complete lines 27, 28, 32, and 33.	TICOK IIC	ĭ				
ŭ	27				1,806,349.	27	2,546,872.	
3ala	28			_	4,638.	28	787,578.	
Jd.		Organizations that do not follow FASB ASC			,		, ,	
Ψ		and complete lines 29 through 33.	, , , , , , , , , , , , , , , , , , , ,					
ō	29	Capital stock or trust principal, or current fun	ds		29			
ets	30	Paid-in or capital surplus, or land, building, or				30		
Ass	31	Retained earnings, endowment, accumulated		Г		31		
Net Assets or Fund Balances	32				1,810,987.	32	3,334,450.	
2	33	Total liabilities and net assets/fund balances			1,974,237.	33	3,522,236.	
	,				, = = , = =		Form 990 (202	

Form **990** (2022)

Pai	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,5					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,9					
3	Revenue less expenses. Subtract line 2 from line 1	3	1,5	37,0	58.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,8	10,9	87.			
5	Net unrealized gains (losses) on investments	5		53,5	95.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	3,3	34,4	50.			
Pa	rt XIII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
			_	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 on Schedule O.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2t	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the							
	review, or compilation of its financial statements and selection of an independent accountant?		20	:	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	1	X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					
			For	m 990	(2022)			

(2021

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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.

Open to Public Instructions and the latest information Inspection

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection
Employer identification number

OMB No. 1545-0047

								*-***9969
Part I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	S.	
The organ	nization is not a private found							
1 📋	A church, convention of ch	•		•		I)(A)(i).		
2	A school described in sect							
3	A hospital or a cooperative		•		(b)(1)(A)(ii	ii).		
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
	city, and state:							
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
	section 170(b)(1)(A)(iv). (Complete Part II.)							
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7 X		_					e general ı	oublic described in
	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)							
8	A community trust describe	•	(1)(A)(vi). (Complete Part	: II.)				
9	An agricultural research org				ed in conju	ınction with a l	and-grant	college
	or university or a non-land-g				-		-	•
	university:		,		, ,	,	· ·	
10	An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membershi	p fees, and	d gross receipts from
	activities related to its exen							
	income and unrelated busin		·					•
	See section 509(a)(2). (Co				•	, ,		
11	An organization organized a	and operated exclusi	vely to test for public sat	ety. See	section 50	09(a)(4).		
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne functio	ns of, or to car	ry out the	purposes of one or
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section s	509(a)(2).	See section 5	09(a)(3).	Check the box on
	lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and	12g.	
а	Type I. A supporting orga	anization operated, si	upervised, or controlled	by its supp	orted org	anization(s), ty	pically by	giving
	the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustee	s of the su	upporting
	organization. You must o	complete Part IV, Se	ections A and B.					
b	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization	ı(s), by hav	ving
	control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the supp	ported
	organization(s). You mus	t complete Part IV,	Sections A and C.					
С	Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionall	y integrate	ed with,
	its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ctions A,	D, and E.		
d	Type III non-functionally	/ integrated. A supp	orting organization oper	ated in cor	nnection v	vith its support	ed organiz	zation(s)
	that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distr	ibution red	quirement and	an attentiv	/eness
	requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
е 🗌	Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II	l, Type III	
	functionally integrated, or	r Type III non-function	nally integrated supportir	ng organiz	ation.			
f Ent	er the number of supported o	organizations						
g Pro	vide the following information	about the supporte	d organization(s).					
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of	•	(vi) Amount of other
	organization		above (see instructions))	Yes	No	support (see in:	structions)	support (see instructions)
Total								

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	951,891.	1079031.	1196675.	2025113.	3706845.	8959555.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	951,891.	1079031.	1196675.	2025113.	3706845.	8959555.
5	The portion of total contributions						
·	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
							643,954.
_							8315601.
	Public support. Subtract line 5 from line 4.						0313001.
		(a) 2012	(h) 2010	(a) 2020	(4) 2021	(a) 0000	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2018 951,891.	(b) 2019 1079031.	(c) 2020 1196675.	(d) 2021 2025113.	(e) 2022 3706845.	(f) Total 8959555.
	Amounts from line 4	931,091.	10/9031.	1190073.	2023113.	3700043.	0939333.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	1 202	12 400	10 740	10 500	26 160	00 250
	and income from similar sources	1,383.	13,488.	18,740.	12,588.	36,160.	82,359.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						9041914.
	Gross receipts from related activities,	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<u>,426,928.</u>
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	fourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	91.97 %
	Public support percentage from 2021					15	<u>%</u>
16 a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	-			-		
	more, and if the organization meets the	-					
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization						
				,,	,		(Form 990) 2022

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(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sed	etion A. Public Support	siow, picase comp	nete i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						,,
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 unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 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 amount on line 13 for the year						
c	Add lines 7a and 7b						
8 Sec	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(4) 2010	(2) 2010	(0) 2020	(4) 2021	(0) 2022	(1) 10141
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		·	•	. , . ,	
0 -	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (I		-			15	<u>%</u>
	Public support percentage from 2021		<u> </u>			16	<u>%</u>
	ction D. Computation of Inves					14=1	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	<u>%</u>
19a	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar	=	-				
b	33 1/3% support tests - 2021. If the	•				•	
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization						

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Schedule A (Form 990) 2022

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
3a		
- Oa		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
0-		
9a		
9b		
9с		
10a		
154		
۸۵.		
10b		

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Par	t IV Su	ipporting Organizations (continued)			
				Yes	No
11	Has the or	ganization accepted a gift or contribution from any of the following persons?			
		who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		, the governing body of a supported organization?	11a		
b		nember of a person described on line 11a above?	11b		
	•	ntrolled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Pa	· · · · · · · · · · · · · · · · · · ·	11c		
Sect	ion B. T	ype I Supporting Organizations			
				Yes	No
1	Did the ao	overning body, members of the governing body, officers acting in their official capacity, or membership of one or			
		ported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	•	operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		on, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
		ganization operate for the benefit of any supported organization other than the supported	-		
		on(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		w providing such benefit carried out the purposes of the supported organization(s) that operated,			
		d, or controlled the supporting organization.	2		
Sect	ion C. T	ype II Supporting Organizations			
				Yes	No
1	Were a ma	ajority of the organization's directors or trustees during the tax year also a majority of the directors			
		s of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		ement of the supporting organization was vested in the same persons that controlled or managed			
	Ü	rted organization(s).	1		
Sect	ion D. A	II Type III Supporting Organizations			
				Yes	No
1	Did the or	ganization provide to each of its supported organizations, by the last day of the fifth month of the			
	organizatio	on's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organizatio	on's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any	of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organizatio	on(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organiz	zation maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason	of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant	voice in the organization's investment policies and in directing the use of the organization's			
	income or	assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported	organizations played in this regard.	3		
Sect	ion E. T	ype III Functionally Integrated Supporting Organizations			
1		box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The	organization satisfied the Activities Test. Complete line 2 below.			
b		organization is the parent of each of its supported organizations. Complete line 3 below.			
С		organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction		
		Test. Answer lines 2a and 2b below.		Yes	No
		antially all of the organization's activities during the tax year directly further the exempt purposes of			
		rted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		ported organizations and explain how these activities directly furthered their exempt purposes,			
		rganization was responsive to those supported organizations, and how the organization determined			
		activities constituted substantially all of its activities.	2a		
		tivities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		re of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		e reasons for the organization's position that its supported organization(s) would have engaged in	۵.		
		vities but for the organization's involvement.	2b		
		Supported Organizations. Answer lines 3a and 3b below.			
		ganization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of	f each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		I

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b | 232025 12-09-22 | Schedule A (Form 990) 2022

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

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Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu			
Section	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function		d Type III supporting orga	nization (see

Schedule A (Form 990) 2022

instructions).

Par	t v Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	inizations _{(continu}	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	S	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	s	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
<u>a</u>	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
<u>e</u>	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
c	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

232028 12-09-22 Schedule A (Form 990) 2022

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Emı	oloyer identification number
	CAPTAIN	S FOR CLEAN WATER	R INC		**-***9969
Pa	art I-A Complete if the org	anization is exempt unde	er section 501(c) o	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			
Pa	art I-B Complete if the org	anization is exempt unde	er section 501(c)(3).	
_	Enter the amount of any excise tax			-	 \$
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955		\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
<u>k</u>	If "Yes," describe in Part IV.				1/01
Pa	art I-C Complete if the org	anization is exempt unde	er section 501(c),	except section 501(c)(3).
	Enter the amount directly expended	, , ,	·	***************************************	\$
2	Enter the amount of the filing organ		-		
_	exempt function activities				\$
3	Total exempt function expenditures		•		Φ
4	line 17b Did the filing organization file Form				Yes No
5	Enter the names, addresses and en				
J	made payments. For each organiza	• •		-	
	contributions received that were pro	•			•
	political action committee (PAC). If	additional space is needed, provi	de information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

			CAPTAINS						-d F		**9969	
Pä	art II-A	Complete if the org section 501(h)).	anization is	exemp	ot under s	ection	501(0)(3) and fil	ea r	orm 5768 (eie	ction und	ier
	Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). Check if the filing organization checked box A and "limited control" provisions apply.											
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)						((a) Filing organization's totals	(b) Affiliate	• .		
1:	a Total lo	bbying expenditures to influ	uence public op	inion (gra	assroots lobb	oying) .				10,174.		
- 1	b Total lo	bbying expenditures to influ	uence a legislati	ve body ((direct lobby	ing)				66,279.		
	c Total lo	bbying expenditures (add li	nes 1a and 1b)							76,453.		
	d Other e	xempt purpose expenditure	es						1	,450,655.		
	e Total ex	cempt purpose expenditure	s (add lines 1c	and 1d)					1	,527,108.		
	f Lobbyir	ng nontaxable amount. Ente	er the amount fr	om the fo	ollowing table	e in both	column	ıs.		226,355.		
	If the an	nount on line 1e, column (a) o	r (b) is: T	he lobby	ing nontaxa	ble amo	unt is:					
	Not ove	er \$500,000	2	0% of the	e amount on	line 1e.						
	Over \$5	600,000 but not over \$1,000	0,000 \$	100,000	plus 15% of	the exces	ss over	\$500,000.				
	Over \$1	,000,000 but not over \$1,5	00,000 \$	175,000	plus 10% of	the exces	ss over	\$1,000,000.				
	Over \$1	,500,000 but not over \$17,	000,000 \$	225,000	plus 5% of th	ne excess	s over \$	31,500,000.				
	Over \$1	7,000,000	\$	1,000,00	0.]			
_	- Crosse	esta nantavabla amaunt (an	tor OEO/ of line	1.5						56,589.		
	-	oots nontaxable amount (en ct line 1g from line 1a. If zer		0						0.		
		ct line 1f from line 1c. If zero	•	^						0.		
		is an amount other than ze								0.		
	•	is an amount other than 2e ig section 4911 tax for this			,	Ü		F01111 47 20			Yes	☐ No
	. 5,55. (11)	.g			ging Period							
		(Some organizations t	nat made a sec	tion 501		do not ha	ave to	complete all	of the	e five columns be	elow.	
			Lobbying	Expendi	itures Durin	g 4-Year	Avera	ging Period				

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total			
2a Lobbying nontaxable amount	130,518.	157,819.	192,785.	226,355.	707,477.			
b Lobbying ceiling amount (150% of line 2a, column(e))					1,061,216.			
c Total lobbying expenditures	4,373.	8,923.	13,858.	76,453.	103,607.			
d Grassroots nontaxable amount	32,630.	39,455.	48,196.	56,589.	176,870.			
e Grassroots ceiling amount (150% of line 2d, column (e))					265,305.			
f Grassroots lobbying expenditures				10,174.	10,174.			

Schedule C (Form 990) 2022

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)		(b)
the lobbying activity.	Yes	No	Am	ount
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).	ection 501(c)(5), or s	section	
301(0)(0).			Yes	l N
				+
Word substantially all (00% or more) dues received pendeductible by members?		- 1	1 1	
, , , , , , , , , , , , , , , , , , , ,			1	1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), so the organization is exempt under section 501(c)(4).	rom the prior year ection 501(c)(? 5), or s	2 3 section	e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for art III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	rom the prior year ection 501(c)(e ered "No" OR	? 5), or s (b) Pa	2 3 section	e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for art III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members	rom the prior year ection 501(c)(ered "No" OR	? 5), or s (b) Pa	2 3 section art III-A, line	e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for art III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members	rom the prior year ection 501(c)(ered "No" OR	? 5), or s (b) Pa	2 3 section art III-A, line	e 3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).	rom the prior year ection 501(c)(c) ered "No" OR political	5), or s (b) Pa	2 3 section rt III-A, line	e 3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditures next year? Taxable amount of lobbying and political expenditures. See instructions Out to Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated)	rom the prior year ection 501(c)(c) ered "No" OR political es ne excess and political	? 5), or s (b) Pa	2 3 section art III-A, line 1 2a 2b 2c 3 4 5	e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditures next year? Taxable amount of lobbying and political expenditures. See instructions Out to Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated)	rom the prior year ection 501(c)(c) ered "No" OR political es ne excess and political	? 5), or s (b) Pa	2 3 section art III-A, line 1 2a 2b 2c 3 4 5	e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditures next year? Taxable amount of lobbying and political expenditures. See instructions Out to Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated)	rom the prior year ection 501(c)(c) ered "No" OR political es ne excess and political	? 5), or s (b) Pa	2 3 section art III-A, line 1 2a 2b 2c 3 4 5	e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditures next year? Taxable amount of lobbying and political expenditures. See instructions Out to Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated)	rom the prior year ection 501(c)(c) ered "No" OR political es ne excess and political	? 5), or s (b) Pa	2 3 section art III-A, line 1 2a 2b 2c 3 4 5	e 3, is

531745_1

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

CAPTAINS FOR CLEAN WATER INC

Employer identification number **-***9969

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	1	(le) Francis and other accounts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	_	
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		-
	for charitable purposes and not for the benefit of the donor of		
Par		registration are used IV all on Forms 200.	
			Fart IV, line 7.
1	Purpose(s) of conservation easements held by the organization		i a latacija alli, imparadant lanal ana
	Preservation of land for public use (for example, recrea	. —	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
0	Preservation of open space	fied concernation contribution in the form	of a concentration accompant on the last
2	Complete lines 2a through 2d if the organization held a qualit day of the tax year.	ned conservation contribution in the form	Held at the End of the Tax Year
	Total number of conservation easements Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str	usture included in (a)	
u	Number of conservation easements included in (c) acquired a		2d
3	historic structure listed in the National Register		
3	year	leased, extinguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	· · · · · · · · · · · · · · · · · · ·	
J	violations, and enforcement of the conservation easements if		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
•			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
	5, 1	, ,	ζ ,
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for public.	olic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these item	S.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and b	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2022

	t III Organizations Maintaining Co	ollections of Art	, Histo	orical Tre	easures, o	r Other	Similar	Assets	(continu	ued)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
3	Using the organization's acquisition, accession	n, and other records	, check	any of the	following that	t make sig	nificant us	e of its	(**************************************		
	collection items (check all that apply):	,		•	· ·						
а	Public exhibition	d	L	_oan or exc	hange progra	am					
b	Scholarly research	е									
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how the	ey further th	ne organizatio	on's exemp	ot purpose	in Part	XIII.		
5	During the year, did the organization solicit or	receive donations o	f art, his	torical trea	sures, or othe	er similar a	ssets				
	to be sold to raise funds rather than to be ma	intained as part of th	e organi	ization's co	llection?				Yes		No
Pai	t IV Escrow and Custodial Arrang	jements. Comple	te if the	organizatio	n answered	"Yes" on F	orm 990,	Part IV,	ine 9, or		
	reported an amount on Form 990, Part	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for c	ontribution	s or other ass	sets not in	cluded				
	on Form 990, Part X?							\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for e	scrow or co	ustodial acco	unt liability	y?	🗀	Yes		No
b	If "Yes," explain the arrangement in Part XIII.										
Pai	t V Endowment Funds. Complete if		swered "	'Yes" on Fo							
		(a) Current year	(b) Pi	rior year	(c) Two yea	rs back (d) Three yea	ars back	(e) Four	years b	ack_
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g	, column (a)) held as:						
а	a Board designated or quasi-endowment%										
b	b Permanent endowment%										
С	c Term endowment%										
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.									
3a	Are there endowment funds not in the posses	sion of the organizat	tion that	are held a	nd administer	red for the			_		
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat								3b		
4	Describe in Part XIII the intended uses of the		vment fu	ınds.							
Pai	t VI Land, Buildings, and Equipme										
	Complete if the organization answered										
	Description of property	(a) Cost or ot basis (investm			t or other (other)		cumulated reciation		(d) Book	value	
1a	Land										
b	Buildings										
	Leasehold improvements										
d	Equipment	58,8	375.				<u>34,67</u>	3.	24	,20	2.
e	Other										
Tota	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part >	(, colum	n (B). line 1	0c.)				24	,20	2.

Schedule D (Form 990) 2022

Complete if the organization answered "Yes" o (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market v		
(4) =:	(b) Book value	(c) Wellied of Valdation. Good of one	d or your market value	
Closely held equity interests				
3) Other				
(A)				
(B)				
(C)				
(D)				
` _				
(E)				
(F)				
(G)				
(H)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" o				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value	
(1) CHARLES SCHWAB BOND FUNDS	162,614.	COST		
(2) CHARLES SCHWAB EQUITY	188,471.	COST		
(3) CHARLES SCHWAB ETF	342,519.	COST		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	693,604.			
Part IX Other Assets.				
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.		
(a) D	Description		(b) Book value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)			
Part X Other Liabilities.			•	
		1: 11f C F 000 D-+ V line 05		
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	Te or TIT. See Form 990, Part X, line 25		
Complete if the organization answered "Yes" o (a) Description of liability	n Form 990, Part IV, line 1	Te or TIT. See Form 990, Part X, line 25	(b) Book value	
1. (a) Description of liability	n Form 990, Part IV, line 1	Te or TT. See Form 990, Part X, line 25		
(a) Description of liability (1) Federal income taxes	n Form 990, Part IV, line 1	Te or TTI. See Form 990, Part X, line 25	(b) Book value	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE	n Form 990, Part IV, line 1	Te or TTI. See Form 990, Part X, line 25	(b) Book value 1,297	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE (3) OPERATING LEASE LIABILITY	n Form 990, Part IV, line 1	Te or TTT. See Form 990, Part X, line 25	(b) Book value	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE (3) OPERATING LEASE LIABILITY (4)	n Form 990, Part IV, line 1	Te or TTT. See Form 990, Part X, line 25	(b) Book value 1,297	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE (3) OPERATING LEASE LIABILITY (4) (5)	n Form 990, Part IV, line 1	Te or TTT. See Form 990, Part X, line 25	(b) Book value 1,297	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE (3) OPERATING LEASE LIABILITY (4) (5) (6)	n Form 990, Part IV, line 1	Te or TTT. See Form 990, Part X, line 25	(b) Book value 1,297	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE (3) OPERATING LEASE LIABILITY (4) (5) (6) (7)	n Form 990, Part IV, line 1	Te or TTT. See Form 990, Part X, line 25	(b) Book value 1,297	
1. (a) Description of liability (1) Federal income taxes (2) SALES TAX PAYABLE (3) OPERATING LEASE LIABILITY (4) (5) (6)	n Form 990, Part IV, line 1	Te or TTT. See Form 990, Part X, line 25	(b) Book value 1,297	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

,790,373.
266,046.
,524,327.
4,812.
,529,139.
,266,910.
, _ 0 0 , D _ 0 0
329,641.
,937,269.
4,812.
,942,081.
, , , , , , , , , , ,
, , , , , , , , , , , , , , , , , , , ,
2; Part XI,
2; Part XI,
2; Part XI, 84,721.
2; Part XI,
2; Part XI, 84,721.
2; Part XI, 84,721.
84,721. 244,920. 329,641.
2; Part XI, 84,721.
84,721. 244,920. 329,641.
84,721. 244,920. 84,721. 244,920.
84,721. 244,920. 329,641.
84,721. 244,920. 84,721. 244,920.

Schedule D	(Form 990) 2022	CAPTAINS FOR	CLEAN	WATER	INC	**-***9969	Page 5
Part XIII	(Form 990) 2022 Supplemental Inform	mation (. age e
I dit XIII	Cupplemental infor	(continuea)					
-							

SCHEDULE G (Form 990)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service	do to www.iis.gov/i offisso for instructions and the fatest information.								
Name of the organization									
	sing Activities.	Complete	if the organization answe		es" or	n Form 990, Part IV, li	ine 17. I	Form 990-EZ	filers are not
	complete this part					01			
a Mail solicitate		ed funds th	rough any of the followin e Solicita						
c Phone solici									
d In-person so									
			ement with any individual ntity in connection with p				tees, or	Yes	. No
			ntities (fundraisers) pursu			-	ne fundr		
compensated at le					Ü				
(i) Name and addres or entity (fund			(ii) Activity	(iii) fundr have con or con contribu	ustody trol of	(iv) Gross receipts from activity	to (or r	nount paid etained by) ndraiser d in col. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No				
Total	Total								
			red or licensed to solicit o		utions	or has been notified	it is exe	empt from re	gistration

232081 10-27-22

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2022

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gro	oss income on Form 990-	-EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				(add col. (a) through		
			RESTORE GALA	1	col. (c))	
Φ			(event type)	(event type)	(total number)	(-7)
Revenue			401 004	271 060	24 001	007 004
Rev	1	Gross receipts	421,934.	371,869.	34,081.	827,884.
	,	Less: Contributions	402,629.	371,869.	34,081.	808,579.
	_	Less. Contributions	402,025	371,003.	34,001.	000,373.
	3	Gross income (line 1 minus line 2)	19,305.			19,305.
						-
	4	Cash prizes				
	5	Noncash prizes		80,752.		80,752.
Direct Expenses		D 1/6 1111	122 505			122 505
ber	6	Rent/facility costs	132,505.			132,505.
Û	7	Food and beverages				
irec	′	Food and beverages				
	8	Entertainment				
	9	Other direct expenses			18,952.	31,663.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)			244,920.
		Net income summary. Subtract line 10 from li				-225,615.
Pa	ırt I		answered "Yes" on Form	1990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	T	(b) Pull tabs/instant		(d) Total gaming (add
ne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				3 1 3		(-) 3 (-)
Re	1	Gross revenue				
S	2	Cash prizes				
Expenses						
xpe	3	Noncash prizes				
S Ct E		Doob/ford!!haraseha				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
		Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
_	Го	to the state(s) is which the examination condu	rata gaming activities			
9		ter the state(s) in which the organization condu the organization licensed to conduct gaming a	_			Yes No
		No," explain:				Tes NO
~						
		ere any of the organization's gaming licenses re			ear?	Yes No
b	lf "	Yes," explain:				
	_					

Schedule G (Form 990) 2022

232082 10-27-22

Sch	edule G (Form 990) 2022 CAPTAINS FOR CLEAN WATER INC	***99	69	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	es	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	es	No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility	13b		/ %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		
14	the the hame and address of the person who prepares the organization's gaining/special events books and records.			
	News			
	Name			
	Address			
				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L Y	es	No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
c	: If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
10	daming manager information.			
	Name			
	Name			
	Coming manager companation			
	Gaming manager compensation \$			
	Description of annian months of			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	Y	es	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III	rt III, lines	s 9, 9	b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
	· · · · · · · · · · · · · · · · · · ·			
				-

Schedule G (Form 990)	CAPTAINS FOR	CLEAN	WATER	INC	**-***9969	Page 4
Schedule G (Form 990) Part IV Supplemental I	nformation (continued)		•			
	(Continued)					
			-			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

|--|

OMB No. 1545-0047

å 0 **Employer identification number** Schedule I (Form 990) 2022 6966***-** INVITATIONAL SPONSORSHIP BRET MCKINSTRY ENDOWMENT (h) Purpose of grant or assistance GENERAL OPERATIONS FUND AND FISHING X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 0 (e) Amount of assistance noncash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 10,000, 6,107 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table INC (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. WATER 501(C)(3) 501(C)(3) Enter total number of other organizations listed in the line 1 table CAPTAINS FOR CLEAN **-**3969 **-**2799 General Information on Grants and Assistance (**p**) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization FOUNDATION - 10501 FGCU BOULEVARD FLORIDA GULF COAST UNIVERSITY NORTH PALM BEACH, FL 33408 EVERGLADES LAW CENTER INC or government - FORT MYERS, FL 33965 378 NORTHLAKE BLVD 105 Name of the organization Part I Part II Q

232101 10-31-22

Page 2

6966***-**

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) 2022

Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 0 40,000. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance EMERGENCY RELIEF DISASTER FUND

Part IV Supplemental Information. Provide the information required in Part II, line 2; Part III, column (b); and any other additional information.

LINE PART I, BOTH CO-FOUNDERS OF THE ORGANIZATION THE EXECUTIVE AND PROGRAM DIRECTORS,

USE CONSISTENT GUIDELINES WHEN SELECTING OTHER ORGANIZATIONS AND/OR

PROGRAMS TO SUPPORT. REQUIREMENTS INCLUDE A SIMILAR MISSION THAT ALSO

BENEFITS THE COMMUNITY AND THE INDUSTRY

Schedule I (Form 990) 2022 35 232102 10-31-22

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number ** - * * * 9 9 6 9

	CAPTAINS FOR	CLEAN	WATER INC			**_*	**9	969	
Pai	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	n	(d) Method of de noncash contribu		_	S
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	Х	1	80,752.	FMV				
8	Intellectual property			-					
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic 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								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organization	zation during	the tax year for co	ontributions					
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29					
								Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 through	gh 28,	that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for				
	exempt purposes for the entire holding period?	?					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	policy that re	equires the review of	of any nonstandard contribu	tions?		31		X
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash					
	contributions?						32a		X
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is che	cked,				
	describe in Part II.								

 $\label{eq:LHA} \textbf{ For Paperwork Reduction Act Notice, see the Instructions for Form 990.}$

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CAPTAINS FOR CLEAN WATER INC

Employer identification number **-***9969

FORM 990, PART VI, SECTION B, LINE 11B:
A CERTIFIED PUBLIC ACCOUNTANT REVIEWS THE FORM 990 WITH THE EXECUTIVE
DIRECTOR AND THEN THE EXECUTIVE DIRECTOR REVIEWS THE FORM 990 WITH THE FULL
BOARD OF DIRECTORS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
THE CFCW BY-LAWS INCLUDE A CONFLICT OF INTEREST REQUIREMENT. ALL BOARD
MEMBERS ARE REQUIRED TO SIGN AN ANNUAL CONFLICT OF INTEREST DOCUMENT.
FORM 990, PART VI, SECTION B, LINE 15A:
THE ORGANIZATION BY-LAWS DELEGATE THE RESPONSIBILITY OF COMPENSATION FOR
EMPLOYEES TO THE EXECUTIVE COMMITTEE. THIS INCLUDES SETTING THE EXECUTIVE
OFFICER SALARY AND APPROVING THE RECOMMENDATION FOR ALL EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 18:
THE FORM 990 IS AVAILABLE UPON REQUEST.
FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS THAT ARE AVAILABLE TO THE PUBLIC UPON REQUEST INCLUDE
THE CFCW BY-LAWS, PERSONNEL POLICY, SAFETY PROCEDURES AND OPERATIONAL
DOCUMENT, LICENSE AND PERMIT DOCUMENTS, VOLUNTEER GUIDELINES AND PROCEDURES