# Form **990**

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2015

Open to Public

Department of the Treasury Internal Revenue Service 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.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Ā	For the	2015 calendar year, or tax year beginning October , 201	5, and ending	Septen	nber 30	<b>, 20</b> 16		
В	Check if a	applicable: C Name of organization Water.org			D Employ	er identification number		
	Address					58-2060131		
	Name cha			E Telephone number				
	Initial retu	·						
Ħ		all return/terminated City or town, state or province, country, and ZIP or foreign postal code						
$\overline{\Box}$	Amended	· · · · · · · · · · · · · · · · · · ·			G Gross re	ecelpts \$ 16,527,314		
$\Box$		on pending F Name and address of principal officer: Gary White		H(a) Is this a pr		subordinates? Yes No		
تـــا	Application	117 W 20th Street, Suite 203, Kansas City, MO 64108				sincluded? Yes No		
_	Taxa ayan		or	4 ''		list. (see instructions)		
<del>'</del>	Website:		Ur L 521	H(c) Group				
K			V					
	art I		Year of formation	1993	· w State	of legal domicile; NC		
		Summary			# a alaa			
4	1	Briefly describe the organization's mission or most significant activiti						
Governance	-	number one health problem, unsafe and inadequate water supplies, and	to raise funds	to help figl	nt this im	mense problem - one		
Пa		community at a time.				**		
Š	1	Check this box ▶☐ if the organization discontinued its operations o	r disposed of	more than		its net assets.		
Ğ		Number of voting members of the governing body (Part VI, line 1a).			3	16		
og S	I	Number of independent voting members of the governing body (Part	•		4	16		
£	ı	Fotal number of individuals employed in calendar year 2015 (Part V,	line 2a) .		5	63		
Activities &	ı	Total number of volunteers (estimate if necessary)			6	0		
¥	7a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0		
	b I	Net unrelated business taxable income from Form 990-T, line 34 .			7b	0		
				Prior Ye	ar	Current Year		
ø	8 (	Contributions and grants (Part VIII, line 1h)	21	,186,597	16,029,028			
딦	9	Program service revenue (Part VIII, line 2g)		0	0			
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		78,114	94,533			
œ	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e	)		0	287,683		
	12	Fotal revenue—add lines 8 through 11 (must equal Part VIII, column (A	), line 12)	21	,264,711	16,411,244		
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			,223,076	5,560,504		
		Benefits paid to or for members (Part IX, column (A), line 4)	0		0			
Ø	1	Salaries, other compensation, employee benefits (Part IX, column (A), lin		5	,655,746	7,445,280		
ıse	1	Professional fundraising fees (Part IX, column (A), line 11e)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0		
Expenses	3	Fotal fundraising expenses (Part IX, column (D), line 25) ▶	983,284					
Щ	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3	,218,934	4,772,289		
	1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line	25)		,097,756	17,778.073		
	1	Revenue less expenses. Subtract line 18 from line 12			,166,955	(1,366,829)		
- S		To voltabilities of political capabilities for month line 12 1 1 1 1 1 1		inning of Cu		End of Year		
ets or lances	20	Total assets (Part X, line 16)		2/	,624,804	23,521,367		
Net Asse Fund Bali	21	Fotal liabilities (Part X, line 26)	· · · <del> </del>		,381,521	1,592,057		
¥ 5	22	Net assets or fund balances. Subtract line 21 from line 20	` ` ` <del> </del>		,243,283	21,929,310		
	art II	Signature Block	• • • 1	23	,245,205	21,323,310		
		ies of perjury, I declare that I have examined this return, including accompanying sched	lulas and statoms	nto and to th	a bast of s	ny kaoviodae, and holief it is		
		and complete. Declaration of preparer (other than officer) is based on all information of				ny kilowiedge and belief, it is		
	T	Monne O Kean			3/1	1/2017		
Sig	ın l	Signature of officer		l Dat		1/2017		
He		Yvonne J. Kean, Director of Finance			-			
	'	Type or print name and title						
		Print/Type preparer's name Preparer's signature	Date			¬ PTIN		
Pa		1 W15-1	311	1.5	Check [			
Pr	eparer		115		self-emp	7 7 00 102001		
Us	e Only			Firm	's EIN ►	44-0160260		
		Firm's address ► 1201 Walnut St., Ste 1700 KC, MO 64016		Pho	ne no.	816-221-6300		
Μa	y the IRS	S discuss this return with the preparer shown above? (see instruction	ns)			📝 Yes 🗌 No		

Part			this Dort III	
1	Briefly describe the organization's mission		this Part III	🗸
•	Our goals are to draw attention to the world		ineafa and inadequate water cumplies and	to raise funds
	to help fight this immense problem, one cor			
	to help right this immense problem, one con	innanty at a time.		
2	Did the organization undertake any signif prior Form 990 or 990-EZ?			Yes ☑ No
	If "Yes," describe these new services on S			
3	Did the organization cease conducting, services?			☐ Yes ☑ No
	If "Yes," describe these changes on Sche			
4	Describe the organization's program servexpenses. Section 501(c)(3) and 501(c)(4) the total expenses, and revenue, if any, for	) organizations are required to	report the amount of grants and allocation	
4a	(Code:) (Expenses \$1, Water Programs and WaterCredit Initiative -			
4b	(Code:) (Expenses \$1,	915,381 including grants of \$	13,198) (Revenue \$	)
	Advocacy and Outreach - see attached narra	ative		
4c	(Code:) (Expenses \$1,	056,029 including grants of \$	0) (Revenue \$	)
	New Ventures - see attached narrative			
4d	Other program services (Describe in Sche			
	(Expenses \$ including gra		venue \$ )	
4e	Total program service expenses ▶	14,788,916		

Part	Checklist of Required Schedules		V	N-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1	<b>√</b>	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	✓	<b>√</b>
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4	1	·
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<b>√</b>
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		<b>√</b>
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		<b>√</b>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i> .	11e		<b>√</b>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		✓
14 a	7 1 3 7 3	14a	✓	
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	<b>✓</b>	
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	1	
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	_	1
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		<b>√</b>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		<b>√</b>
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		✓

Part	Checklist of Required Schedules (continued)			
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20a		<b>V</b>
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		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>√</b>
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	<b>√</b>	•
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		<b>√</b>
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<b>√</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i>	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29	✓	,
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N</i> , <i>Part I</i>	30		<b>√</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>V</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33	<b>√</b>	•
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	<b>√</b>	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	<b>√</b>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	*	<b>√</b>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI </i>			· ✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	37	<b>√</b>	•

Form 99	00 (2015)				Page
Part	· ·				i ugo
	Check if Schedule O contains a response or note to any line in this Part V				. [
	Chook in Contouring a response of moto to any line in time t art v			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b>   27			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0	1		
С	Did the organization comply with backup withholding rules for reportable payments	to vendors and			
	reportable gaming (gambling) winnings to prize winners?		1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 63			
b	If at least one is reported on line 2a, did the organization file all required federal employment	tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst	ructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year	?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in So	chedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature of				
	over, a financial account in a foreign country (such as a bank account, securities account, or	or other financial			
	account)?		4a	<b>✓</b>	
b	If "Yes," enter the name of the foreign country:  India, Kenya, Peru, Indonesia, Bangladesh				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Fi	nancial Accounts			
_	(FBAR).	_	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	-	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,0		0-		,
h	organization solicit any contributions that were not tax deductible as charitable contributions' If "Yes," did the organization include with every solicitation an express statement that such		6a		<b>√</b>
b		CONTINUUTIONS OF	6b		
7	gifts were not tax deductible?		OD		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and	nartly for goods			
u	and services provided to the payor?	partly for goods	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<b>V</b>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property to		75		
•	required to file Form 8282?		7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			Ť
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b		7e		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefits		7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file	•	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m	aintained by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related personal control of the sponsoring organization make a distribution to a donor, donor advisor, or related personal control of the sponsoring organization make a distribution to a donor, donor advisor, or related personal control of the sponsoring organization make a distribution to a donor, donor advisor, or related personal control of the sponsoring organization make a distribution to a donor, donor advisor, or related personal control of the sponsoring organization make a distribution to a donor, donor advisor, or related personal control of the sponsoring organization make a distribution to a donor advisor.	son?	9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b	-		
11	Section 501(c)(12) organizations. Enter:	1			
a	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources	445			
40-	against amounts due or received from them.)	11b	10.		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu If "Yes," enter the amount of tax-exempt interest received or accrued during the year	of Form 1041?	12a		
U	ii 100, onto the amount of tax-exempt interest received of accided duffing the year	1401			

Section 501(c)(29) qualified nonprofit health insurance issuers.

the organization is licensed to issue qualified health plans

Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves on hand . . . . . . . . . . . . . . . .

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Did the organization receive any payments for indoor tanning services during the tax year? .

13

14a

13a

14a

14b

13b

13c

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 16 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 in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ✓ √ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? . . . . . . . . . . . . . . . 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 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 before filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 / 14 ✓ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . ✓ 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a ✓ b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 

#### Section C. Disclosure

Part VI

2

3

4

5

6

13

14

15

17	List the states with which a copy of this Form 990 is required to be filed ▶ See full listing in Schedule O
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)
	available for public inspection. Indicate how you made these available. Check all that apply.
	✓ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial 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 books and records: ▶ Yvonne Kean, 117 W 20th Street, Suite 203 Kansas City, MO 64108 (816)877-8400

Page <b>7</b>	
	Page <b>7</b>

# 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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
<b>(A)</b> Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an	(D) Reportable compensation	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Adam Schechter - Board Member	11	<b>√</b>								
(2) Andy Sareyan - Vice Chair	1	<b>✓</b>		1						
(3) Cortney Erin - Board Member	1	<b>√</b>								
(4) Cynthia Fisher - Board Member	1	<b>√</b>								
(5) Tony Stayner - Board Member	1	1								
(6) Hillary Schneider - Board Member	1	1								
(7) Jill Nash - Board Member	1	<b>✓</b>								
(8) Jodi Kahn - Board Member	1	<b>√</b>								
(9) Keith Quinn - Board Member	1	1								
(10) Larry Tanz - Secretary	1	1		<b>√</b>						
(11) Lynn Taliento - Board Chair	1 1	1		<b>√</b>						
(12) Paul O'Connell - Board Member	1 1	1								
(13) Paula Veale - Board Member	1	1								
(14) Sandra Naftzger - Board Member	1	1								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average hours per week (list any	box, office	unles	Pos neck ss pe	rson	e than o is both or/trust	an tee)	(D)  Reportable compensation from	<b>(E)</b> Reportable compensation from related	( <b>F)</b> Estima m amour		ated int of	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	)	omper from organi and re	nsatior the zation	
(15) Terry Trayvick - Treasurer	1	<b>✓</b>		1									
(16) Gary White - CEO and Co-Founder	20 20	· ✓		<b>√</b>				231,281				3(	0,152
(17) Jennifer Schorsch - President	35 5	•		<b>√</b>				199,622					1,392
(18) Richard Thorsten - Director of Intl Programs	30 10					1		146,188					6,075
(19) Alix Lebec - Director of Bus Dev & Investor Re						<b>√</b>		143,370					2,839
(20) Julie LaGuardia - Sr. Strategist, Brand Pships	40					<b>√</b>		112,130				1(	0,012
(21) Yvonne Kean - Director of Finance & Admin	35 5					✓		143,131				1:	2,767
(22) Chevenee Reavis-Frmr Dr Strategic Initiatives	40					✓		178,779				1;	3,172
(23)													
(24)													
(25)													
Sub-total	 VII, Sectio				 		<b>&gt; &gt; &gt;</b>	1,154,501		0		120	6,409
Total number of individuals (including but reportable compensation from the organical compensation)		l to th	ose	e list	ted a	above	e) w	ho received mo	ore than \$100,	000 of			
3 Did the organization list any former of employee on line 1a? If "Yes," complete of the state o							-	oloyee, or high	-		3	Yes	No
4 For any individual listed on line 1a, is the organization and related organizations individual													
<ul><li>5 Did any person listed on line 1a receive of for services rendered to the organization</li></ul>									ation or individ	lual	5	<b>✓</b>	<u></u>
Section B. Independent Contractors								· ·					
Complete this table for your five highest compensation from the organization. Repyear.	•											n's ta	×
(A) Name and business add	Iress							<b>(B)</b> Description of se	ervices	Com	(C) pensa	tion	
Albright Stonebridge Group - 601 13th Street NW, 1	Oth Floor, W	Vashir	ngto	n, D	)C 2	0005	Glo	obal Advocacy (	Consulting			282	2,500
Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

# Part VIII Statement of Revenue

		Check if Schedule O contains	a respo	nse or note to	any line in this	Part VIII		🗌
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	1a	189,992				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	- ,				
A G	С	Fundraising events	1c					
ar /	d	Related organizations	1d					
s, C	е	Government grants (contributions)	1e					
ion	f	All other contributions, gifts, grants,						
the lat		and similar amounts not included above	1f	15,723,525				
d E	g	Noncash contributions included in lines 1a	a-1f: \$	115,511				
a Co	h	Total. Add lines 1a-1f		🕨	16,029,028			
an				Business Code				
še	2a							
8 B	b							
جَ	С							
Sel	d							
ш	е							
Program Service Revenue	f	All other program service revenu						
	<u>g</u>	<b>Total.</b> Add lines 2a–2f Investment income (including						
	3	and other similar amounts) .						<b>5.1.000</b>
	4	•		<b>+</b>	54,302			54,302
	4 5	Income from investment of tax-exe	•	•				
	3	Royalties		(ii) Personal				
	6a	Gross rents		(1) 1 2 2 1 2 1 2 1				
	b	Less: rental expenses						
	C	Rental income or (loss)						
	d	Nist wantaling a sure and (1.5.5)		•				
	7a	Gross amount from sales of (i) Securit		(ii) Other				
		and the self-result of the self-	56,301	0				
	b	Less: cost or other basis	·					
		and sales expenses . 11	15,511	559				
	С	Gain or (loss)	40,790	-559				
	d	Net gain or (loss)	<u>.</u>	▶	40,231			40,231
une	8a	Gross income from fundraising						
Š		events (not including \$						
Other Revenu		of contributions reported on line 1 See Part IV, line 18	. a_					
₹		Less: direct expenses						
		Net income or (loss) from fundra	· · · ·	vents . ►				
	9a	Gross income from gaming activ						
		See Part IV, line 19						
		Less: direct expenses		ties ►				
		Net income or (loss) from gamin Gross sales of inventory,		iles 🕨				
	IVa	returns and allowances						
	b	Less: cost of goods sold						
	C	Net income or (loss) from sales		torv				
}		Miscellaneous Revenue		Business Code				
	11a	Other income		900099	15,012	15,012		
	b	Management fee revenue		541611	300,870	300,870		
	С	Partnership income		900099	(28,199)	(28,199)		
	d	All other revenue						
	е	Total. Add lines 11a-11d		+	287,683			
	12	Total revenue. See instructions	3	🕨	16,411,244	287,683	0	94,533

# Part IX Statement of Functional Expenses

Form 990 (2015)

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 t include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C)  Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	5,560,504	5,560,504		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	503,457	272,723	166,695	64,040
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,874,212	4,360,654	1,021,257	492,30
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	197,615	137,278	39,225	21,112
9	Other employee benefits	437,139	309,335	83,761	44,043
10	Payroll taxes	432,857	297,371	87,710	47,776
11	Fees for services (non-employees):				
а	Management				
b	Legal	74,167	63,713	9,873	582
С.	Accounting	72,903	56,067	15,876	960
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O.)	2 104 127	1 700 014	2/0.024	0/ 27/
12	Advertising and promotion	2,194,127	1,728,914	368,834	96,379
13	Office expenses	244 383,130	244 292,068	0 48,189	42,874
14	Information technology	303,130	292,000	40,109	42,074
15	Royalties				
16	Occupancy	445,745	429,085	11,020	5,64
17	Travel	1,120,191	984,216	66,525	69,450
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,120,171	704,210	00,323	07,430
19	Conferences, conventions, and meetings .	49,992	36,334	11,105	2,553
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	149,360	117,400	20,473	11,487
23	Insurance	21,764	16,747	3,215	1,801
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Foreign exchange (gain)/loss	36,276	36,276	0	
b	Bank and Credit Card Fees	68,794	12,473	1,273	55,049
C	Dues, Subscriptions, Licenses and Fees	63,842	31,753	19,996	12,093
d	Provision for credit losses	17,108	6,352	0	10,756
e	All other expenses	74,646	39,412	30,848	4,386
25	Total functional expenses. Add lines 1 through 24e	17,778,073	14,788,916	2,005,874	983,283
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)	.,2,570	.,. 22,. 10	1,22,21	
	· · · · · ·	<u> </u>			Form <b>990</b> (2015

# Part X Balance Sheet

1   Cash—non-interest-bearing   1   Cash—non-interest-bearing   2   Savings and temporary cash investments   2,533,722   3   11,656     2   Savings and temporary cash investments   2,533,722   3   11,656     3   Accounts receivable, net   2,533,722   3   11,656     4   Accounts receivable, ret   2,533,722   3   11,656     5   Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule   5     6   Loans and other receivables from other disqualified persons (as defined under section 4858(K)(K)), parens described in section 4958(K)(K)(R), and contributing employes and sponsoring organizations (see instructions). Complete Part II of Schedule			Check if Schedule O contains a response or note to any line in this Pa	rt X		
Pledges and grants receivable, net				• •		
3 Pledges and grants receivable, net		1	Cash—non-interest-bearing		1	
4 Accounts receivables, net		2		20,200,673	2	17,887,123
Tusteses, key employees, and highest compensated employees. Complete Part II of Schedule L    Complete Part II of Schedule L		3		2,533,722	3	11,656
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				43,893	4	75,313
Complete Part II of Schedule L   5		5				
6 Loans and other receivables from other disqualified persons (as defined under section 4958(q)(1)), persons described in section 4958(q)(5)(6), and contributing employers and sponsoring organizations of section 501(q)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L						
4936(f(1)) persons described in section 4936(c(3)(E), and contributing employers and sponsoring organizations of section 501c(3)(9) voluntary employees' beneficiary organizations (see instructions). Complete Parl II of Schedule L			·		5	
organizations (see instructions). Complete Part II of Schedule L		6				
7						
9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part Iv of Schedule D  10b Less: accumulated depreciation  10c 1335,538  11d 11 Investments—publicly traded securities  12 Investments—program-related. See Part IV, line 11  13 Investments—program-related. See Part IV, line 11  14 Intangible assets  15 Other assets. See Part IV, line 11  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disquilified persons. Complete Part Iv of Schedule D  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disquilified persons. Complete Part Iv of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties  26 Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and 17 (ASC 958), check here ► ✓ and complete lines 30 through 34.  27 Unrestricted net assets  0 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total liabilities and net assets/fund balances  24 (24,4804) 44 23,321,367  34 70tal liabilities and net assets/fund balances  24 (24,4804) 34 23,521,367	şts		-		-	
9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part Iv of Schedule D  10b Less: accumulated depreciation  10c 1335,538  11d 11 Investments—publicly traded securities  12 Investments—program-related. See Part IV, line 11  13 Investments—program-related. See Part IV, line 11  14 Intangible assets  15 Other assets. See Part IV, line 11  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disquilified persons. Complete Part Iv of Schedule D  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disquilified persons. Complete Part Iv of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties  26 Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and 17 (ASC 958), check here ► ✓ and complete lines 30 through 34.  27 Unrestricted net assets  0 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total liabilities and net assets/fund balances  24 (24,4804) 44 23,321,367  34 70tal liabilities and net assets/fund balances  24 (24,4804) 34 23,521,367	SSe	7				
10a	ď	8			8	
ther basis. Complete Part VI of Schedule D b Less: accumulated depreciation . 10b 535,538 145,126 10c 789,872 11 Investments—publicity traded securities				219,813	9	251,225
b Less: accumulated depreciation   10b   535,538   145,126   10c   789,872		10a				
11   Investments—publicly traded securities   774,405   11   853,734   12   Investments—other securities. See Part IV, line 11   12   13   Investments—program-related. See Part IV, line 11   466,110   13   3,206,150   14   Intangible assets   14   466,110   15   446,294   15   Other assets. See Part IV, line 11   241,002   15   446,294   16   23,521,367   17   Accounts payable and accrued expenses   1,230,615   17   1,592,057   18   Grants payable   18   Grants payable   18   Grants payable   18   18   19   Deferred revenue   150,906   19   0   0   0   0   0   0   0   0   0		_	1,020,110			
12   Investments – other securities. See Part IV, line 11   13   Investments – program-related. See Part IV, line 11   466,110   13   3,206,150   14   Intangible assets   14   15   Other assets. See Part IV, line 11   241,062   15   446,294   16   Total assets. Add lines 1 through 15 (must equal line 34)   24,624,804   16   23,521,367   17   Accounts payable and accrued expenses   1,230,615   17   1,592,057   18   Grants payable   18   19   Deferred revenue   150,906   19   00   00   00   00   00   00   00			333/333			
13   Investments — program-related. See Part IV, line 11   466,110   13   3,206,150     14   Intangible assets   14     15   Other assets. See Part IV, line 11   241,062   15   446,294     16   Total assets. Add lines 1 through 15 (must equal line 34)   24,624,804   16   23,521,367     17   Accounts payable and accrued expenses   1,230,615   17   1,592,057     18   Grants payable   15   16   17   1,592,057     18   Other expense   1,230,615   17   1,592,057     19   Deferred revenue   150,906   19   0     20   Tax-exempt bond liabilities   20   21     21   Escrow or custodial account liability. Complete Part IV of Schedule D   21     22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L   22     23   Secured mortgages and notes payable to unrelated third parties   23     24   Unsecured notes and loans payable to unrelated third parties   23     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   25     26   Total liabilities. Add lines 17 through 25   1,381,521   26   1,592,057     27   Total liabilities. Add lines 17 through 25   1,382,5012   28   9,945,134     28   Temporarily restricted net assets   9,418,271   27   11,984,176     29   Permanently restricted net assets   13,825,012   28   9,945,134     29   Permanently restricted net assets   0,000     20   13,000   10   10   10   10   10   10     20   15,000   10   10   10   10   10     20   15,000   10   10   10   10   10     20   15,000   10   10   10   10   10     20   15,000   10   10   10   10   10     21   15,000   10   10   10   10   10     22   15,000   10   10   10   10   10     23   15,000   10   10   10   10   10   10     24   10   10   10   10   10   10   10     25   13,000   10   10   10   10   10     26   15,000   10   10   10   10   10   10     20   15,000   10   10   10   10   10     20   1				774,405		853,734
14			· · · · · · · · · · · · · · · · · · ·			
15 Other assets. See Part IV, line 11			. •	466,110		3,206,150
16				241.0/2		447.204
17			<b>-</b>			
18   Grants payable   18   150,906   19   0   0   0   0   0   150,906   19   0   0   0   0   0   0   0   0   0						
19 Deferred revenue   150,906   19   00				1,230,015		1,392,057
Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D .  21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				150 006		0
21 Escrow or custodial account liability. Complete Part IV of Schedule D .  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties .  24 Unsecured notes and loans payable to unrelated third parties .  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D				130,700		0
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			<b>F</b>			
trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Organizations that follow SFAS 117 (ASC 958), check here   28 Temporarily restricted net assets  29 Permanently restricted net assets  29 Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that fo	Ś					
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	iţie					
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	ig		disqualified persons. Complete Part II of Schedule L		22	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties		24	
of Schedule D       25         26       Total liabilities. Add lines 17 through 25       1,381,521       26       1,592,057         Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.       and complete lines 27 through 29, and lines 33 and 34.       27       11,984,176         28       Temporarily restricted net assets       9,418,271       27       11,984,176         29       Permanently restricted net assets       29         Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.       30         30       Capital stock or trust principal, or current funds       30         31       Paid-in or capital surplus, or land, building, or equipment fund       31         32       Retained earnings, endowment, accumulated income, or other funds       32         33       Total net assets or fund balances       23,243,283       33       21,929,310         34       Total liabilities and net assets/fund balances       24,624,804       34       23,521,367		25				
Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets			of Schedule D		25	
Complete lines 27 through 29, and lines 33 and 34.         27       Unrestricted net assets		26	Total liabilities. Add lines 17 through 25	1,381,521	26	1,592,057
<b>34</b> Total liabilities and net assets/fund balances	ses					
<b>34</b> Total liabilities and net assets/fund balances	anc	27	Unrestricted net assets	9.418.271	27	11.984.176
<b>34</b> Total liabilities and net assets/fund balances	3al	28				
<b>34</b> Total liabilities and net assets/fund balances	둳	29				
<b>34</b> Total liabilities and net assets/fund balances	or Fur					
<b>34</b> Total liabilities and net assets/fund balances	ts c	30	Capital stock or trust principal, or current funds		30	
<b>34</b> Total liabilities and net assets/fund balances	Se	31	· · · · · · · · · · · · · · · · · · ·		31	
<b>34</b> Total liabilities and net assets/fund balances	Į As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
<b>34</b> Total liabilities and net assets/fund balances	Net	33		23,243,283	33	21,929,310
	_	34	Total liabilities and net assets/fund balances	24,624,804	34	

Form 990 (2015) Page **12** 

Part	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)		16,41	1,244	
2	Total expenses (must equal Part IX, column (A), line 25)		17,77	78,073	
3	Revenue less expenses. Subtract line 2 from line 1		(1,36	6,829)	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4				
5					
6	Donated services and use of facilities			0	
7	Investment expenses			0	
8	Prior period adjustments			0	
9	Other changes in net assets or fund balances (explain in Schedule O)		2	28,199	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))		21,92	29,310	
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		$\sqcup$	
			Yes	No	
1	Accounting method used to prepare the Form 990:  Cash Accrual Other	<u> </u>			
	If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O.	in			
_					
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 reviewed on a separate basis, consolidated basis, or both:	or			
	•				
	Separate basis Consolidated basis Both consolidated and separate basis	Oh			
D	Were the organization's financial statements audited by an independent accountant?	. 2b	<b>√</b>		
	separate basis, consolidated basis, or both:	a			
	☐ 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 oversignment of the control	thr			
C	of the audit, review, or compilation of its financial statements and selection of an independent accountant		./		
	If the organization changed either its oversight process or selection process during the tax year, explain		V		
	Schedule O.	""			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	in			
Ja	the Single Audit Act and OMB Circular A-133?	" 3a		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			_	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.				
	, , , , , , , , , , , , , , , , , , ,		<u></u>	(0045)	

Form **990** (2015)

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

# **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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization					Employer identification number		
Water							60131
Par		•				,	ons.
1 ne c	organization is not a private foundary  A church, convention of church		,		-	•	
2	A school described in <b>section</b>						
3	☐ A hospital or a cooperative ho		•			• •	
4	A medical research organization hospital's name, city, and state	on operated in co					(iii). Enter the
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	An organization that normally described in section 170(b)(1)			port from	ı a gover	nmental unit or fron	n the general public
8	A community trust described i	n section 170(b)	<b>)(1)(A)(vi).</b> (Complete	Part II.)			
9	An organization that normally receipts from activities related support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	certain taxable i	exception	ns, and (2) no more ess section 511 ta	e than 331/3% of its
10	☐ An organization organized and	d operated exclus	sively to test for public	c safety.	See <b>sect</b>	ion 509(a)(4).	
11	An organization organized and one or more publicly supported the box in lines 11a through 11	d organizations d	lescribed in section 5	<b>09(a)(1)</b> ⊙	r <b>section</b>	509(a)(2). See sect	ion 509(a)(3). Check
а	☐ <b>Type I</b> . A supporting organiz the supported organization(sorganization. <b>You must con</b>	s) the power to re	egularly appoint or ele				
b	☐ Type II. A supporting organic control or management of the organization(s). You must control to the organization organization organization organization organization.  ☐ Type II. A supporting organization organization organization organization organization organization organization.  ☐ Type II. A supporting organic control organization organization organization organization organization.  ☐ Type II. A supporting organization organization organization organization organization organization.  ☐ Type II. A supporting organization	ne supporting org	ganization vested in th				` ' '
С	Type III functionally integra its supported organization(s)						y integrated with,
d	☐ Type III non-functionally in that is not functionally integr requirement (see instructions	ated. The organi	zation generally must	satisfy a	distributi	on requirement and	
е		ation received a	written determination	from the	IRS that	it is a Type I, Type	II, Type III
f	Enter the number of supported	organizations .					
g	Provide the following informatio	n about the supp	orted organization(s).	•			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 **(e)** 2015 (f) Total grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . 21,186,597 9,160,131 12,194,353 15,470,475 16,029,028 74,040,584 2 revenues levied organization'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 3. . . . 4 9,160,131 12,194,353 15,470,475 21,186,597 16,029,028 74,040,584 The portion of total contributions by 5 each person (other than governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 30,277,033 **Public support.** Subtract line 5 from line 4. 43,763,511 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 **(e)** 2015 (f) Total 7 Amounts from line 4 . . . . . . 9,160,131 12,194,353 15,470,475 21,186,597 16,029,028 74,040,584 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . . . . . . . 4,301 21,260 13,745 54,302 116,190 Net income from unrelated business 9 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.) . . . . . . . 287,683 287,683 **Total support.** Add lines 7 through 10 11 74,444,457 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 18,385 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 58.79 % Public support percentage from 2014 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ✓ 331/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

# Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

<del></del>	in the organization rails to quality	under the te	sis listed bei	ow, piease co	inplete Fart	11.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise						
2	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						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	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						
	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from						
0 1:	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 2015	(f) Total
9	Amounts from line 6	<del></del>					
10a							
	payments received on securities loans, rents, royalties and income from similar sources.						
<b>L</b>	·						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						
10	• •						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
. •	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	⊥ n's first. secon	d. third. fourth	ı. or fifth tax v	∟ ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	Ū		•			,,,,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2015 (line 8			3. column (f))		15	%
16	Public support percentage from 2014 Sch					16	<del></del>
	on D. Computation of Investment Inc						
17	Investment income percentage for 2015 (			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2014			-		18	%
19a	331/3% support tests - 2015. If the organ					nore than 331/3	%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2014. If the organize	ation did not o	check a box on	line 14 or line	19a, and line 16	is more than 3	33 <sup>1</sup> /3%, and
	line 18 is not more than 331/3%, check this I	oox and <b>stop h</b>	<b>nere.</b> The organ	ization qualifies	as a publicly s	upported orgar	nization 🕨 🗌
20	Private foundation. If the organization di	d not check a	hox on line 14	19a or 19h	check this hox	and see instru	ctions • 🗆

#### Part IV **Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

All Supporting Organizations

ecu	on A. All Supporting Organizations		V	NI -
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	No
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	5a		
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?	5b		
6	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control? 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? <i>If</i> "Yes," <i>provide detail in Part VI.</i>	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 <b>Part VI.</b>	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined in 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 <b>Part VI.</b>	9c		
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 10b below.	10-		
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.)	10a 10b		

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
Secti	on B. Type I Supporting Organizations	•		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization'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 organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it	nstru	ction	 s):
а	☐ The organization satisfied the Activities Test. Complete <b>line 2</b> below.			,
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that those activities constituted substantially all of its activities.			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the containing of the containing organization or the containing or the containing organization organization or the containing organization or			
Section 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		
<ul> <li>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)</li> <li>7 Other expenses (see instructions)</li> </ul>	6		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section 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):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% 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 .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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		
5 Income tax imposed in prior year	5		
<b>6 Distributable Amount</b> . 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-functionall instructions).	y-in	tegrated Type III support	ing organization (see

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish e						
2	Amounts paid to perform activity that directly furthers exe	rted					
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purp	nizations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in <b>Part VI</b> ). See instructions.						
	<b>Total annual distributions.</b> Add lines 1 through 6.						
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive				
	(provide details in <b>Part VI</b> ). See instructions.						
9	Distributable amount for 2015 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount		(**)	/···\			
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015			
_1_	Distributable amount for 2015 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2015						
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2015:						
a							
b							
	From 2012						
d	From 2013						
<u>е</u> f	Total of lines 3a through e						
	Applied to underdistributions of prior years						
<u>g</u> h	Applied to underdistributions of prior years  Applied to 2015 distributable amount						
— <u>''</u>	Carryover from 2010 not applied (see instructions)						
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2015 from Section						
4	D, line 7: \$						
a	Applied to underdistributions of prior years						
b	Applied to 2015 distributable amount						
	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2015, if						
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2015. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
	instructions).						
7	Excess distributions carryover to 2016. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а							
b							
C	Excess from 2013						
d	Excess from 2014						
е	Excess from 2015						

III, line 12; Part IV, Section B, lines 1 and 2; Part IV, 3a and 3b; Part V, line 1;	on. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part In A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, mplete this part for any additional information. (See instructions.)
Part II, Section B, Line 10	
	2015
Other Income	\$ 15,012
Management Fee Revenue	\$ 300,870
Partnership Income	\$ (28,199)
Total	\$ 287,683

#### Schedule B

Water.org

(Form 990, 990-EZ, or 990-PF)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

**Schedule of Contributors** 

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** 58-2060131

Organization type (check one):						
Filers of	<b>:</b>	Section:				
Form 99	0 or 990-EZ	✓ 501(c)( 3 ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		☐ 527 political organization				
Form 99	0-PF	☐ 501(c)(3) exempt private foundation				
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation				
		☐ 501(c)(3) taxable private foundation				
Note. Or instruction	ons.	, (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules					
<b>V</b>	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year					

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$2,058,759	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,906,6963	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		<b>\$</b> 1,554,370	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$1,333,333	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$901,485	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
66		<b>\$</b> 467,500	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number
Water.org 58-2060131

Part I	Contributors (see instructions). Use duplicate copies of F	Part I if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 446,000	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

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

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

• Se	ection 501(c)(4), (5), or (6) orga	nizations: Complete Part III.			
Name	of organization			Employer ider	ntification number
Water.					58-2060131
Part		e organization is exempt und		-	organization.
1	•	the organization's direct and indire		-	
2	<u>.</u>				)
3	volunteer nours				
Part	-	e organization is exempt und			
1		excise tax incurred by the organiza			
2		excise tax incurred by organizatior	•		
3	•	ed a section 4955 tax, did it file For	•	ear?	= =
4a					<u> </u>
b Dort	If "Yes," describe in Part  Complete if the	IV. e organization is exempt und	or coation 501/e	a) avaant aaatian E01	(0)(2)
1-anu		ly expended by the filing organiz			(0)(3).
•					
2		filing organization's funds contrib			
_		vities			
3	Total exempt function e	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,	
	line 17b				
4	Did the filing organization	n file Form 1120-POL for this year'	?		Yes No
5		ses and employer identification nur			
		ents. For each organization listed,			
		ontributions received that were pro- fund or a political action committe			
	as a separate segregated	lund of a political action committee		Tial space is fleeded, prov	The information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization. If
					none, enter -0
(1)					
(2)					
(0)					
(3)					
(4)					
(5)					
(6)					

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sched	ule C (Form 990 or 990-EZ) 2015					Page ∠		
Par	t II-A Complete if the organization section 501(h)).	on is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ction under		
A C	Check ► ☐ if the filing organization be	elongs to an affi	iliated group (an	d list in Part IV	each affiliated gro	oup member's		
	name, address, EIN, expe					•		
вС	Check ► ☐ if the filing organization ch							
		bying Expenditu			(a) Filing	(b) Affiliated		
	(The term "expenditures" n			)	organization's totals	group totals		
1a	Total lobbying expenditures to influence	e public opinion (	grass roots lobby	ina)	138			
b					2,404			
C		•	• ,	• •	2,542			
d		•			17,775,531			
e					17,778,073			
f	Lobbying nontaxable amount. Enter		•		17,770,073			
	columns.	1,000,000						
	If the amount on line 1e, column (a) or (b) is	: The lobbying r	nontaxable amount	is:	1,000,000			
	Not over \$500,000	20% of the ame		. 101				
	Over \$500,000 but not over \$1,000,000		15% of the excess of	over \$500.000.				
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000.					
	Over \$1,500,000 but not over \$17,000,000		5% of the excess o					
	Over \$17,000,000	\$1,000,000.						
g	Grassroots nontaxable amount (enter 2	5% of line 1f) .			250,000			
h	Subtract line 1g from line 1a. If zero or	ess, enter -0			0			
i	Subtract line 1f from line 1c. If zero or le	ess, enter -0			0			
j	If there is an amount other than zero	on either line	1h or line 1i, did	the organization	file Form 4720			
	reporting section 4911 tax for this year	?				Yes No		
	(Some organizations that made a se	ection 501(h) ele	eriod Under sec ction do not have uctions for lines	e to complete all	of the five columr	ns below.		
	Lobbyin	g Expenditures I	During 4-Year Av	eraging Period				
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	(e) Total		
2a	, , ,	614,531	717,219	804,888	1,000,000	3,136,638		
b	Lobbying ceiling amount (150% of line 2a, column (e))							
С	Total lobbying expenditures	13,483	0	0	2,542	16,025		
d	Grassroots nontaxable amount							

484,420

592

179,305

201,222

Schedule C (Form 990 or 990-EZ) 2015

1,114,947

250,000

138

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	า 5768		
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(i	a)		(b)	
	ription of the lobbying activity.	Yes	No	Aı	mount	t
1	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:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	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? Other activities?					
i :						
j 2a	Total. Add lines 1c through 1i					
2a 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), section 501(c) 501(c)(6).	(5),	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes."		Par		line (	3, is
1	Dues, assessments and similar amounts from members	٠.	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	ying	4			
5	and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)		5			
Par	<u> </u>	•	<u> </u>			
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	un lis	t)· Pa	rt II-A I	nes 1	land
	instructions); and Part II-B, line 1. Also, complete this part for any additional information.	ap iio	ι,, . α			and

Schedule C (For	m 990 or 990-EZ) 2015	Page 4
Part IV	Supplemental Information (continued)	

## **SCHEDULE D** (Form 990)

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.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Name o	f the organization		Employer identification number
Water.			58-2060131
Par			
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(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 funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene conferring impermissible private benefit?	fit of the donor or donor advisor, or f	or any other purpose
Part	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	☐ Preservation of land for public use (e.g., recrea	ition or education) 🗌 Preservation o	f a historically important land area
	□ Protection of natural habitat	☐ Preservation of	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		<b>2a</b>
b	Total acreage restricted by conservation easement	ts	2b
С	Number of conservation easements on a certified I		
d	Number of conservation easements included in		on a
	_		· · 2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terr	minated by the organization during the
	tax year ►		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		
_	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
_	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing	conservation easements during the year
•	<b>&gt;</b> \$	0(1)	
8	Does each conservation easement reported on line		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text of		iancial statements that describes the
	organization's accounting for conservation easeme		
Part		· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered		
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the f		
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar public service, provide the following amounts relatives	r assets held for public exhibition, eding to these items:	ducation, or research in furtherance of
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art following amounts required to be reported under S	, historical treasures, or other similar SFAS 116 (ASC 958) relating to these it	assets for financial gain, provide the tems:
а	Revenue included on Form 990, Part VIII, line 1 .		▶ \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Schedu	le D (Form 990) 2015									Pa	ge 2
Part	Organizations Maintaining C	collections of A	Art, His	torical 1	reasures	, or O	ther Similar A	Sset	s (con	tinue	d)
3	Using the organization's acquisition, ac collection items (check all that apply):	cession, and oth	ner reco	rds, chec	k any of th	ne follo	wing that are a	signi	ficant u	use o	fits
а	☐ Public exhibition		d	Loan	or exchang	ae prod	rams				
b	☐ Scholarly research										
c	☐ Preservation for future generations		C		'						
4	Provide a description of the organization	n'e collectione a	nd aval	ain how t	hav furthar	the or	ranization's ev	amnt	nurnos	o in I	Dar
7	XIII.	ii 3 conceners a	па схрі	alli How t	ncy farther	tile oit	garnzation 5 cx	Jilipt	puipos	,	aı
5	During the year, did the organization so	aliait ar raaaiya	donation	o of ort	historical t	rocouro	a or other sim	ilor			
	assets to be sold to raise funds rather th	nan to be maintai							Yes		No
Part	IV Escrow and Custodial Arran	•									
	Complete if the organization a 990, Part X, line 21.						•		nt on F	Form	
1a	Is the organization an agent, trustee, c							not			
	included on Form 990, Part X?							. [	Yes		No
b	If "Yes," explain the arrangement in Part	XIII and comple	te the fo	ollowing to	able:						
		·		•				Amoι	int		
С	Beginning balance					10	:				
d	Additions during the year					10					
e	Distributions during the year					16					
f	Ending balance					11					
	Did the organization include an amount							tv2 [	¬ Voc		No
2a h	If "Yes," explain the arrangement in Part							•			140
	t V Endowment Funds.	Alli. Check here	e ii tile e	хріапацо	n nas been	provid	ed on Part Alli	• •	<u> </u>		
гаг		noward "Vac"	on Fo	m 000 I	Dort IV/ lin	o 10					
	Complete if the organization a	(a) Current year		ior year	(c) Two yea		(d) Thusa years he	alı la	e) Four ye	b-	
		(a) Current year	( <b>b</b> ) Pr	ior year	(c) Two yea	rs dack	(d) Three years ba	ick (e	Four ye	ears ba	ICK
_	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	current vear en	d baland	ce (line 1c	. column (a	a)) held	as:				
а	Board designated or quasi-endowment		%		(-	,,					
b	Permanent endowment ▶	%	- / 0								
c	Temporarily restricted endowment ▶	·- <sup>/0</sup>									
C	The percentages on lines 2a, 2b, and 2c		nn 0/2								
За	Are there endowment funds not in the p			ization the	nt are hold	and ac	lministored for	tho			
Ja	organization by:	30336331011 01 111	e organi	ızatıori tire	at are rielu	and ac	iiiiiiisterea ioi	uic	[v	/aa   •	
	·							Б		'es l	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations							. [	3a(ii)		
b	If "Yes" on line 3a(ii), are the related orga							. [	3b		
4	Describe in Part XIII the intended uses of		n's end	owment f	unds.						
Part											
	Complete if the organization a	nswered "Yes"	on For	rm 990, F	Part IV, lin	e 11a.	See Form 990	0 <u>,</u> Pai	rt X, lir	<u>ne</u> 10	<u>.</u>
	Description of property	(a) Cost or oth		` '	or other basis		Accumulated	(c	d) Book v	value	
		(investme	ent)	(0	ther)	d	epreciation				
1a	Land				0						0
b	Buildings				0		0				0
	Leasehold improvements				0		0				0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

789,872

789,872

535,538

. ▶

Part VII	Investments – Other Securities Complete if the organization ar		rm 990 Part IV line	11h See Form	990 Part X line 12
	(a) Description of security or categorical (including name of security)		(b) Book value	(c) Meth	nod of valuation: -of-year market value
(1) Financial	derivatives				
(2) Closely-h	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E) (F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.) ▶	·····			
Part VIII	Investments – Program Relat				
	Complete if the organization ar		rm 990, Part IV, line	11c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Met	hod of valuation: of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
<u>(7)</u>					
<u>(8)</u> (9)					
	b) must equal Form 990, Part X, col. (B) line 13.)	<b>&gt;</b>			
Part IX	Other Assets.				
	Complete if the organization ar	swered "Yes" on Fo	rm 990, Part IV, line	11d. See Form	990, Part X, line 15.
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
<u>(7)</u>					
(8) (9)					
	mn (b) must equal Form 990, Part X,	col. (B) line 15.)		▶	
Part X	Other Liabilities.	, ,			
	Complete if the organization ar	swered "Yes" on Fo	rm 990, Part IV, line	11e or 11f. See	Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7) (8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 25.) ▶	•			
	r uncertain tax positions. In Part XIII, pro		note to the organization'	s financial stateme	nts that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2015 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . . 16,197,498 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 24.661 Donated services and use of facilities 2,952 h 0 2d 31,312 Add lines **2a** through **2d** . . . . . . . . . . . . . . . . . . 2e 58.925 Subtract line **2e** from line **1** . . . . . . . . . . . . . 3 3 16,138,573 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 0 4b 272,671 Add lines 4a and 4b . . . 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 16,411,244 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 17,886,492 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2.952 Prior year adjustments 2b 0 Other losses . . . . . . . . . . . . 2c 0 Other (Describe in Part XIII.) . . . . . . . 2d 105,467 Add lines 2a through 2d . . . . . . . . . . . 2e 108,419 3 3 17,778,073 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 0 Add lines **4a** and **4b** . . . . . . . . . . . . 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . 5 17,778,073 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Part X, Line 2 - Uncertain Tax Positions Disclosure: Management has evaluated their income tax positions under the guidance included in ASC 740. Based on their review, management has not identified any material uncertain tax positions to be recorded or disclosed in the financial statements. Part XI, Line 2d and Part XII, Line 2d - WaterCredit Investment Fund 1, LLC is included in the consolidated audit report as a non-controlled entity; however for tax purposes it is considered a controlled entity. Part XI, Line 4b - WaterCredit Investment Fund 1, LLC is included in consolidated audit report but not a controlled entity. The intercompany management fee revenue and expense between WC, LLC and WaterCredit Investment Fund 1, LLC is eliminated during consolidation. Therefore, this amount is WC, LLC 's management fee revenue from WCIF 1.

Schedule D (Form 990) 2015
2522 2 (. 21 200) 2010

Schedule D (Form 990) 2015         Page								
Part XIII	Supplemer	ntal Information (conti	nued)					
Part XI, 4b - 0	Other							
Management	Fee Revenue	\$ 300,870						
Partnership I	ncome	(28,199)						
Total		\$ 272,671						

## **SCHEDULE F** (Form 990)

## **Statement of Activities Outside the United States**

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

anne	of the organization				Linploy	er identification number
	r.org					58-2060131
Par	General Information Form 990, Part IV, line		es Outside	the United States. Comp	olete if the organization	answered "Yes" on
1	For grantmakers. Does the assistance, the grantees' el grants or assistance?	igibility for the	e grants or as	sistance, and the selection		
2	For grantmakers. Describ assistance outside the Unit	e in Part V 1			toring the use of its g	
3	Activities per Region. (The fo	ollowing Part	l, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Ctrl America & Carribean			Grant Making		51,440
(2)	East Asia & the Pactific			Grant Making		953,300
(3)	South America			Grant Making		47,461
(4)	South Asia			Grant Making		1,582,201
(5)	Sub-Saharan Africa			Grant Making		1,796,712
(6)	East Asia & the Pactific	2	15	Program Services	WaterCredit	245,013
(7)	South America	1	3	Program Services	WaterCredit	102,804
(8)	South Asia	2	18	Program Services	WaterCredit	496,807
(9)	Sub-Saharan Africa	2	5	Program Services	WaterCredit & Direct Imp	pact 284,766
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17) 3a						5,560,504
b	Total from continuation sheets to Part I					_

c Totals (add lines 3a and 3b)

5,560,504

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of (a) Name of (f) Manner of (g) Amount of (b) IRS code (c) Region (d) Purpose of (e) Amount of (h) Description valuation (book, FMV, appraisal, other) organization cash non-cash section and EIN grant cash grant of non-cash assistance disbursement assistance (if applicable) (1) Cntrl Amer & Carrib Water Projects 51,440 Wire (2) 81,462 Wire East Asia & Pacific Water Projects (3) 44,503 Wire East Asia & Pacific Water Projects (4) East Asia & Pacific Water Projects 62,327 Wire (5) East Asia & Pacific Water Projects 55,568 Wire (6) East Asia & Pacific Water Projects 15,206 Wire **(7)** East Asia & Pacific Water Projects 27,187 Wire (8) East Asia & Pacific Water Projects 41,834 Wire (9) East Asia & Pacific Water Projects 52,856 Wire (10) East Asia & Pacific Water Projects 49,680 Wire (11) East Asia & Pacific Water Projects 60,620 Wire (12) East Asia & Pacific Water Projects 31,388 Wire (13)East Asia & Pacific Water Projects 23,405 Wire (14) East Asia & Pacific Water Projects 88,652 Wire (15) East Asia & Pacific Water Projects 35,000 Wire (16) East Asia & Pacific Water Projects 40,392 Wire

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	57
3	Enter total number of other organizations or entities	0

Schedule F (Form 990) 2015 Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of valuation (book, FMV, appraisal, other) (a) Name of (f) Manner of (g) Amount of (b) IRS code (d) Purpose of (e) Amount of (c) Region (h) Description organization cash non-cash section and EIN grant cash grant of non-cash assistance disbursement assistance (if applicable) (1) East Asia & Pacific Water Projects 32,130 Wire (2) 19,142 Wire East Asia & Pacific Water Projects (3) East Asia & Pacific Water Projects 30,050 Wire (4) East Asia & Pacific Water Projects 30,819 Wire (5) East Asia & Pacific Water Projects 37,430 Wire (6) 61,780 Wire East Asia & Pacific Water Projects (7) South America Water Projects 38,545 Wire (8) South America Water Projects 7,416 Wire (9) South Asia Water Projects 97,402 Wire (10) South Asia Water Projects 41,385 Wire (11) Water Projects 28,063 Wire South Asia (12) South Asia Water Projects 47,703 Wire (13)South Asia Water Projects 258,179 Wire (14) South Asia Water Projects 205,419 Wire

									Schedule F (Form 9	90) 2015
3	Enter total nun	nber of other o	organizations or en	tities				•	0	
2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									
6)			South Asia	Water Projects	57,207	Wire				
5)			South Asia	Water Projects	40,511	Wire				

(14)

Schedule F (Form 990) 2015 Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of valuation (book, FMV, appraisal, other) (a) Name of (f) Manner of (g) Amount of (b) IRS code (d) Purpose of (e) Amount of (c) Region (h) Description organization cash non-cash section and EIN grant cash grant of non-cash assistance disbursement assistance (if applicable) (1) South Asia Water Projects 9,600 Wire (2) South Asia 70,000 Wire Water Projects (3) South Asia Water Projects 44,520 Wire (4) South Asia Water Projects 44,680 Wire (5) South Asia Water Projects 84,961 Wire (6) 83,325 Wire South Asia Water Projects (7) South Asia Water Projects 85,063 Wire (8) South Asia Water Projects 54,078 Wire (9) South Asia Water Projects 38,409 Wire (10) South Asia Water Projects 60,207 Wire (11) Water Projects 316,216 Wire South Asia (12) South Asia Water Projects 72,775 Wire (13)Sub-Saharan Africa Water Projects 68,892 Wire

									Schedule F (Form 99	0) 2015
3	Enter total number of other organizations or entities							•	0	
2		•	•		•	-	gn country, recognize	•	57	
6)			Sub-Saharan Africa	Water Projects	80,550	Wire				
5)			Sub-Saharan Africa	Water Projects	25,000	Wire				

395,215 Wire

Sub-Saharan Africa Water Projects

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of (a) Name of (f) Manner of (g) Amount of (b) IRS code (c) Region (d) Purpose of (e) Amount of (h) Description valuation (book, FMV, appraisal, other) organization cash non-cash section and EIN grant cash grant of non-cash assistance disbursement assistance (if applicable) (1) Sub-Saharan Africa Water Projects 14,400 Wire (2) Sub-Saharan Africa | Water Projects 23,284 Wire (3) Sub-Saharan Africa Water Projects 64,465 Wire (4) Sub-Saharan Africa Water Projects 337,674 Wire (5) Sub-Saharan Africa Water Projects 60,297 Wire (6) Sub-Saharan Africa Water Projects 419,584 Wire **(7)** Sub-Saharan Africa | Water Projects 164,920 Wire (8) Sub-Saharan Africa Water Projects 64,031 Wire (9) Sub-Saharan Africa | Water Projects 78,400 Wire (10) (11) (12)(13)(14) (15) (16)Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2015 Page **4** 

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	☐ Yes	✓ No

Schedule F (Form 990) 2015 Page **5** 

# Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

For each organization receiving program grant funding, monthly reports are required to be submitted, which contains an accounting
of the amounts expended, compared to original budgets, and explanation of any variances. Requests for changes in budget must be
submitted in writing with explanation. Monitoring and evaluation of project work is assessed with in-person visits to the community sites.
The accrual method is used to account for expenditures.

## **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Water.org

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Employer identification number

58-2060131

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?			
	laf	2		
_				
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		<b>√</b>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		1
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		✓
b	Any related organization?	5b		✓
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		✓
b	Any related organization?	6b		✓
	If "Yes" on line 6a or 6b, describe in Part III.			
_	5			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed		,	
_	payments not described on lines 5 and 6? If "Yes," describe in Part III	7	<b>✓</b>	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			,
	in Part III	8		<b>✓</b>
•	If "Ver" to line O did the apprinting also follow the metable approach and the second to the second			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?			

Schedule J (Form 990) 2015

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The sum of columns (b)(i)-(iii)			f W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
	(i)	174,699	56,582	0	7,623	22,529	261,433	7,483
1 Gary White, CEO	(ii)							
	(i)	162,112	37,510	0	7,187	24,205	231,014	6,717
2 Jennifer Schorsch, President	(ii)							
	(i)	150,363	28,416	0	0	13,172	191,951	(
3 Chevenee Reavis, Director	(ii)							
	(i)	120,744	22,387	0	4,683	8,084	155,898	(
4 Yvonne Kean, Director	(ii)							
	(i)	123,101	23,087	0	0	16,075	162,263	(
5 Richard Thorsten, Director	(ii)							
	(i)	121,155	22,215	0	4,906	7,933	156,209	
6 Alix Lebec, Director	(ii)							
_	(i)							
7	(ii)							
	(ii)							
8	(i)							
9	(ii)							
9	(i)							
10	(ii)							
10	(i)							
11	(ii)							L
•	(i)							
12	(ii)							
	(i)							
13	(ii)		+				+	+
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2015 Supplemental Information Part III Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Part 1, 7. Non-fixed payments in the form of a bonus are determined based on personal and organizational performance and the discretion of the Board of Directors.

## **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

2015

Open To Public

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.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

Water.org 58-2060131 **Types of Property** Part I (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . . . . 2 Art—Historical treasures . . . 3 Art—Fractional interests . . 4 Books and publications . . 5 Clothing and household goods . . . . . . . . . 6 Cars and other vehicles . . . 7 Boats and planes . . . . 8 Intellectual property . . . . 9 Securities—Publicly traded . . . 24 115,511 Value at date of donation Securities-Closely held stock . 10 Securities—Partnership, LLC, 11 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 . . Real estate-Other . . . . 17 18 Collectibles . . . . . . 19 Food inventory . . . . . . 20 Drugs and medical supplies . . 21 Taxidermy . . . . . . 22 Historical artifacts . . . . 23 Scientific specimens . . . . 24 Archeological artifacts . . . 25 26 Other ► ( \_\_\_\_\_) 27 Other ► ( 28 Other ► ( Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (Form 990) (2015) Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Part 1, Column B reflects the number of contributions.

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

#### 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.

OMB No. 1545-0047

Open to Public
Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number Water.org 58-2060131 Part III, 4a, b, c - See attached narrative. Part IV, 11a - The annual 990 tax return is first reviewed by the Audit Committee of the Board, then by the full Board of Directors. The complete Form 990, together with all supplemental schedules is provided to the Board in advance of the meeting so that each board member has adequate time to review. Highlights of the return are presented during a board meeting and each board member is given an opportunity to raise questions or issues. Part VI, 12a - Board members are required to notify the organization of any conflict of interest. This notification should be in advance of the conflict, if known, or as soon as the conflict has been identified. When a conflict has been determined, the board member or officer involved abstains from voting and the organization obtains independent, outside bids. Part VI, 15 - Compensation of officers and key employees is determined by consultation with local, regional or national wage surveys, depending on the appropriateness to the position. 15a - The Executive Director's compensation is determined by the Executive Committee and the board. 15b - All other key employees compensation is determined by the Chief Executive Officer, assessed using comparable data and market salary surveys and then submitted to board for annual approval. Part VI, 16b - Investment in WaterCredit Investment Fund 1 was evaluated by senior staff and presented to the full board with complete explanation and analysis prior to their approval. No written policy or procedures was followed.

Part VI, C19 - Organizational and financial documents of the organization, including annual tax return and audit reports are posted on our website, www.water.org, within 30 days of the issuance of the documents. Other governance documents and conflict of interest policy are available upon request.  Part IX, 11G - Other Operating Expenses & Contractors  Program Management Fundraising  Contract Services \$ 1,670,648 \$ 356,230 \$ 91,750  IT Consulting \$ 46,509 \$ 12,604 \$ 4,629  Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances	Water.org				58-2060131
Part VI, C19 - Organizational and financial documents of the organization, including annual tax return and audit reports are posted on our website, www.water.org, within 30 days of the issuance of the documents. Other governance documents and conflict of interest policy are available upon request.  Part IX, 11G - Other Operating Expenses & Contractors  Program Management Fundraising  Contract Services \$ 1,670,648 \$ 356,230 \$ 91,750  IT Consulting \$ 46,509 \$ 12,604 \$ 4,629  Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances	Part VI, C17 - AK, AL, AR, AZ,	CA, CT, FL, GA, IL, K	Y, MA, MD, ME, MI, MN,	MO, MS, NC, ND, NH, NJ,	NM, NY, OH, OK, OR, PA, RI, SC, TN,
website, www.water.org, within 30 days of the issuance of the documents. Other governance documents and conflict of interest policy are available upon request.  Part IX, 11G - Other Operating Expenses & Contractors  Program Management Fundraising  Contract Services \$ 1,670,648 \$ 356,230 \$ 91,750  IT Consulting \$ 46,509 \$ 12,604 \$ 4,629  Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances	UT, VA, WA, WDC, WI, WV				
website, www.water.org, within 30 days of the issuance of the documents. Other governance documents and conflict of interest policy are available upon request.  Part IX, 11G - Other Operating Expenses & Contractors  Program Management Fundraising  Contract Services \$ 1,670,648 \$ 356,230 \$ 91,750  IT Consulting \$ 46,509 \$ 12,604 \$ 4,629  Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances					
Available upon request.  Part IX, 11G - Other Operating Expenses & Contractors  Program Management Fundraising  Contract Services \$ 1,670,648 \$ 356,230 \$ 91,750  IT Consulting \$ 46,509 \$ 12,604 \$ 4,629  Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances	Part VI, C19 - Organizational a	and financial documer	its of the organization,	including annual tax retu	rn and audit reports are posted on our
Part IX, 11G - Other Operating Expenses & Contractors           Program         Management         Fundraising           Contract Services         \$ 1,670,648         \$ 356,230         \$ 91,750           IT Consulting         \$ 46,509         \$ 12,604         \$ 4,629           Other Professional Fees         \$ 11,757         \$ 0         \$ 0           TOTAL         \$ 1,728,914         \$ 368,834         \$ 96,379           Part XI, 9 - Other changes in net assets or fund balances	website, www.water.org, with	in 30 days of the issua	ance of the documents.	Other governance docun	nents and conflict of interest policy are
Program         Management         Fundraising           Contract Services         \$ 1,670,648         \$ 356,230         \$ 91,750           IT Consulting         \$ 46,509         \$ 12,604         \$ 4,629           Other Professional Fees         \$ 11,757         \$ 0         \$ 0           TOTAL         \$ 1,728,914         \$ 368,834         \$ 96,379           Part XI, 9 - Other changes in net assets or fund balances	available upon request.				
Program         Management         Fundraising           Contract Services         \$ 1,670,648         \$ 356,230         \$ 91,750           IT Consulting         \$ 46,509         \$ 12,604         \$ 4,629           Other Professional Fees         \$ 11,757         \$ 0         \$ 0           TOTAL         \$ 1,728,914         \$ 368,834         \$ 96,379           Part XI, 9 - Other changes in net assets or fund balances					
Contract Services       \$ 1,670,648       \$ 356,230       \$ 91,750         IT Consulting       \$ 46,509       \$ 12,604       \$ 4,629         Other Professional Fees       \$ 11,757       \$ 0       \$ 0         TOTAL       \$ 1,728,914       \$ 368,834       \$ 96,379         Part XI, 9 - Other changes in net assets or fund balances	Part IX, 11G - Other Operating	g Expenses & Contrac	tors		
Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances		Program	Management	Fundraising	
Other Professional Fees \$ 11,757 \$ 0 \$ 0  TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances	Contract Services	\$ 1,670,648	\$ 356,230	\$ 91,750	
TOTAL \$ 1,728,914 \$ 368,834 \$ 96,379  Part XI, 9 - Other changes in net assets or fund balances	IT Consulting	\$ 46,509	\$ 12,604	\$ 4,629	
Part XI, 9 - Other changes in net assets or fund balances	Other Professional Fees	\$ 11 <u>,</u> 757	\$ 0	\$ 0	
	TOTAL	\$ 1,728,914	\$ 368,834	\$ 96,379	
Partnership Income \$ . 28,199	Part XI, 9 - Other changes in r	net assets or fund bala	inces		
	Partnership Income	\$ 28,199			

# SCHEDULE R (Form 990)

**Related Organizations and Unrelated Partnerships** 

2015

OMB No. 1545-0047

Open to Public Inspection

58-2060131

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Water.org
Part I

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) WaterCredit, LLC - 46-5146273					
117 W 20th St #203, Kansas City, MO 64108	Fund Management	Delaware	\$300,870	\$2,089,549	Water.org
(2) WaterCredit Investment Fund 3, LLC - 47-5166202 117 W 20th St #203, Kansas City, MO 64108		Delaware	0	0	WaterCredit LLC
(3)		Delaware		0	Water or earl EEs
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr enti	ollèd`
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Schedule R (Form 990) 2015

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Dispropo alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) WaterCredit Investment												
Fund 1, 30-0819072,	Fund Management	Delware	WaterCredit LLC	Related	(\$28,199)	\$3,120,801		✓	(\$28,199)	✓		29.33%
(2) 117 W 20th St, Suite 203												
Kansas City, MO 64108												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 contr enti	) 12(b)(13) olled ity?
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	'	Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		✓
b	Gift, grant, or capital contribution to related organization(s)	1b	✓	
С	Gift, grant, or capital contribution from related organization(s)	1c		<b>√</b>
d		1d		<b>√</b>
е	Loans or loan guarantees by related organization(s)	1e		<b>√</b>
f	Dividends from related organization(s)	1f		✓
g	Sale of assets to related organization(s)	1g		<b>√</b>
h	Purchase of assets from related organization(s)	1h		<b>√</b>
i		1i		<b>√</b>
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		<b>√</b>
-				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		✓
1		11	1	
m		1m		<b>√</b>
n		1n	<b>√</b>	
0		10	1	
р	Reimbursement paid to related organization(s) for expenses	1p		<b>√</b>
a q		1g		<b>√</b>
·				
r	Other transfer of cash or property to related organization(s)	1r		<b>√</b>
s		1s		<u> </u>
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction	n thre	sholo	ds.
	(a) (b) (c) (d)			
	Name of related organization Transaction Amount involved Method of determining a	amount	invol	ved
	type (a–s)			
(1) W	aterCredit Investment Fund 1 b \$3,206,149 Amount invested			
(2) W	aterCredit Investment Fund 1 \$300,870 3% of assets under ma	anage	men	t
(3)				
(4)				
• •				
(5)				
(6)				
		<del></del>		

Schedule R (Form 990) 2015

# Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501	partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	i) eral or aging ner?	(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	Yes No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													
													000) 0045

Supplemental Information Provide additional Information for responses to questions on Schedule R (see instructions).	Schedule R (Form 990) 2015 Page <b>5</b>		
	Part VII	Supplemental Information	
		Provide additional information for responses to questions on Schedule R (see instructions).	

# Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box . . . . . . . . . . . .

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part II or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print 58-2060131 Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) File by the due date for 117 W 20th St #203 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. Kansas City, MO 64108 Enter the Return code for the return that this application is for (file a separate application for each return) 0 Application **Application** Return Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL Form 1041-A 08 02 Form 4720 (individual) Form 4720 (other than individual) 03 09 Form 990-PF Form 5227 10 04 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ➤ Yvonne Kean, Director - Finance & Administration Fax No. ► 816-421-2086 Telephone No. ► 816-877-8400 • If the organization does not have an office or place of business in the United States, check this box . . . • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . . . ▶ □ . If it is for part of the group, check this box . . . . ▶ □ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until May , 20 17 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► □ calendar year 20 or ► ✓ tax year beginning October 1 , 20 15 , and ending September 30 , 20 16 . If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return 2 ☐ Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3а nonrefundable credits. See instructions. \$ 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

instructions.