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# Form **990**

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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B Check if applicable C Name of organization Wine to Water D Employer idea									yer identifica	tion number	
	Address	change	Doing Business As	Doing Business As							88
_	Name cl	-	Number and street (or P O	box if mail is not	delivered to street	address)	Room/suite	,	E Teleph		
	Initial ref	-	P O Box 2567							828-355-86	i55
$\Box$	Termina		City or town, state or cou	untry, and ZIP + 4			1				
$\overline{\sqcap}$	Amende		Boone, NC 28607						G Gross	receipts \$	545,580
$\overline{\Box}$		ion pending		orincipal officer	Dickson B Hen	dlev		H(a) Is this			Yes V No
_	, фрос.	g	P O Box 2567, Boone,							_	Yes No
<del></del>	Tay-eye	mpt status	✓ 501(c)(3)	501(c) (	) <b>(</b> Insert no )	4947(a)(1) or	527	_		a list (see instr	
<u>.</u>		_	w.winetowater.org		, , (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-		n number	· · · · · · · · · · · · · · · · · · ·
			✓ Corporation ☐ Trust	Association	Other ▶	1 1	ear of formati			e of legal domi	icile NC
	art I	Summ				= 10	sai Oi IOIIIIati	011 2007	1 III Otati	or logar dom	Cite 110
	1		escribe the organization	on's mission o	r most signific	ant activities:	to provi	de clean wa	ater and s	anitation: to	
	'		e awareness about the		_	arre aotratios.	to provi	<u> </u>			J COUCUIC
ခို			. dwareness about the	giobai water or							
Activities & Governance											
Ver	2	Check th	nis box 🕨 🗌 if the organi	zation discontinue	d ite operations o	r disposed of more	a than 25% o	fute not accet	<del></del>		
Ĝ	3					•					-
જ			of voting members of			•			3		7
ties	4		of independent voting			• •	•		4		6
Ξ	5		mber of individuals em		•	io (Part V, line	2a) .		5		3
AC	6		mber of volunteers (es		• •				6		200
	7a		related business reven						7a		0
	b	Net unre	lated business taxable	e income from	£6rm-990-7-	line 34	· · ·	<u></u>	7b		0
Revenue		_		(_		181	<u> </u>	Prior Ye	ar 377,825	Curre	ent Year
	8	, 101 AUG 1 0 2011 I(A)									545,580
	9					100	· · _				
ě	10		ent income (Part VIII, c			<b>"</b> —! .	· · L		122		0
_	11		venue (Part VIII, colum				L				
	12	Total rev	enue-add lines 8 thro		377,947		545,580				
	13	Grants a	nd sımılar amounts pa	aid (Part IX, co	lumn (A), lines	i 1–3) .   .			121,446		288,246
	14	Benefits	paid to or for member	rs (Part IX, col	umn (A), line 4	)					
S	15	Salaries,	other compensation, el	mployee benef	its (Part IX, col	umn (A), lines :	5–10)		80,136		124,519
Expenses	16a	Profession	onal fundraising fees (l	Part IX, colum	n (A), line 11e	e)					
g	b	Total fun	idraising expenses (Pa	art IX, column	(D), line 25) <b>&gt;</b>	•					
û	17		penses (Part IX, colun				· · · · ·		73,141		104,565
_	18	Total exp	oenses. Add lines 13-	17 (must equa	l Part IX, colu	mn (A), line 25	i) .  -		274,723		517,330
ets or   0 1 1	19		e less expenses. Subtr				´ 🗀		103,102		28,250
7 8	3						Be	ginning of Cu	-	End e	of Year
ets (	20	Total ass	sets (Part X, line 16)						175,549		204,289
ASS.	21		oilities (Part X, line 26)						2,094		2,584
Net Asse Fund Bala	22		ets or fund balances. S	Subtract line 2	1 from line 20				173,455		210,705
	art II		ture Block								
_			ury, I declare that I have exa	mined this return.	ıncluding accomi	panving schedules	s and statem	ents, and to t	ne best of r	ny knowledae	and belief it is
			lete Declaration of preparer							my miomocyc	and boller, it is
<u>~</u>			1 3 10	30 d 1.	Lan				3-10-	2011	
Siç	gn	Sign	nature of officer				·	Da	te	<u> </u>	
Ήe			Dicksin Beat	Hip Head	low	oresiden	+				
7)		Тур	e or print name and title	71000	` '	71.07.4.011	1				
_	. !!		ype preparer's name	Prepa	arer's signature		Date	<del></del>	Ta	PTIN	
Pa		′	•		-				Check   self-em	rf	
	epare	1	name •							-7	
US	se On	- 1	address >						n's EIN ►		<del></del>
Ma	v the II		ss this return with the p	preparer show	n above? (see	e instructions)			ne no		Yes No
_			uction Act Notice, see t					110007	· · ·	· ·	<u> </u>
. 0	Lahel/	TOUR NEGU	JUNION AUL MUNICE, SEE N	ue seharare IIIs	40110113.		∪at No	11282Y		FC	иш <b>ээч</b> (2010)

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Part I	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	Provide clean water and sanitation; educate and raise awareness about the global water crisis
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	prior Form 990 or 990-E∠?
	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section
	501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
40	(Code: ) (Expenses \$ 118,588 including grants of \$ 116,363 ) (Revenue \$ )
4a	(Code:) (Expenses \$118,588 including grants of \$116,363 ) (Revenue \$)  Haiti Filter Project
	Wine to Water partners with Filter Pure to provide clean water to the people of Haiti. Our programs in Haiti began in response to the
	January 2010 7.0 magnitude earthquake. Wine to Water partnered with Filter Pure to provide immediate emergency assistant
	through the distribution of 2000 ceramic water filters brought in from the Dominican Republic. After our initial response to the
	earthquake, we began working on a long-term solution for clean water in Haiti with Filter Pure and another organization called Global
	Effect. In April 2010 we began construction of a ceramic filter factory located in jacmel where filters could be make locally and
	distributed easily. The factory is equipped with a hydraulic press, sifting machine, mixer, and firing kiln. It is capable of producing
	1,500 filters per month. Local Haitians are hired to make filters using local clay mixed with silver and a combustible material such as
	sawdust. The filters purify water up to 99.99% at a flow rate of 20-30 liters per day and can provide clean water for a family of 10
	for up to five years. The factory was completed in December 2010 and began producing filters in January, 2011. 2000 filters were
	distributed for emergency assistance immediately following the earthquake, serving an estimated 10,000 victims.
41	
4b	(Code. ) (Expenses \$ 87,005 including grants of \$ 87,005 ) (Revenue \$ )
	Ethiopia Well Project Wine To Water partners with Water Is life International to provide clean water to rural communities in Ethiopia. The program in
	Ethiopia primarily consists of providing clean water to people by drilling wells throughout the community. In many areas of Ethiopia
	the water table is low and the soil is extremely arid. Well drilling at lower depths through hard soil is an expensive endeavor that
	requires heavy equipment such as deep borehole drilling rigs. In 2010, Wine To Water and Water is Life International challenged eac
	other to a matching grant in order to raise enough money for a drill rig that could reach greater capacity. In December we fulfilled
	our commitment, enabling Water is Life to purchase a Pat drill 401-T. This drill rig has the capabilities of drilling in sediment and hard
	rock between 100 and 300 meters deep. The drill rig will begin well drilling in 2011 and will greatly increase productivity in
	providing clean water to the people of Ethiopia.
4-	(Code ) (Function & 24.200 including prosts of @ 24.200 ) (Function &
4c	(Code. ) (Expenses \$ 34,368 including grants of \$ 34,368 ) (Revenue \$ )  Cambodia Shallow Well Project
	Wine To Water partners with a local community based organization in Phnom Penh, Cambodia called Kone Kmeng. This program
	initially began by drilling wells in local villages where families spent hours walking to get clean water. Over the past three years, out
	program has grown to include not only well drilling, but also latrine construction, filters distribution, and education about clean
	water and sanitation. This year we bean a project that allows our partners to produce their own concrete pipes for latrine building.
	WTW also supports local employers and communities. All parts, drill rigs, filters, and other supplies are purchased from local
	vendors. In 2010 91 wells were drilled for 182 families and one school. The beneficiaries includes 525 adults and 786 children. 36
	latrines were constructed for 66 families, including 162 adults and 99 children. 140 water filters were distributed in two provinces to
	140 families, including 468 adults and 404 children. In 2010, clean water and sanitation was provided for a total of 2,444 people,
	including 1,155 adults and 1,289 children. Communities served included 34 villages, 18 communes, and 8 districts within 3
	provinces of Cambodia
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 155,974 including grants of \$ 50,635 ) (Revenue \$ )
4e	Total program service expenses ► 395,935

-art	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	<b>▼</b>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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 "Yes," 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		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, 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	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	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, XII, and XIII	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, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	, , , , ,	14a		<b>/</b>
b 45	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	✓	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, 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 assistance to individuals located outside the United States? 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? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
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		1
20 a		20a	<u> </u>	1
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part	Checklist of Required Schedules (continued)	,		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		<b>√</b>
b c	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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	1	
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>	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	-	1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		1
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		<u> </u>	_
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,  Part VI	37		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
-				<del></del>

Form-99	· · · · · · · · · · · · · · · · · · ·			Page 5
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			. 🗀
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   0		·	-
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	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 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			İ
	organization solicit any contributions that were not tax deductible?	6a	İ	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		✓
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<u>_</u>
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	L	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			<u> </u>
	organization, have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<del> </del>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	}		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	1		
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	┨		
D				
120	against amounts due or received from them.)	12a		
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		1
	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	+-
а	Note. See the instructions for additional information the organization must report on Schedule O.	138	<del>                                     </del>	<del> </del>
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1-	1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	-	+
		1 1-717		

Part '	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change O. See instructions.  Check if Schedule O contains a response to any question in this Part VI			
Section	on A. Governing Body and Management			
1a b	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	<b>√</b>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<b>√</b>
4 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Does the organization have members or stockholders?	5 6		<b>√ √</b>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		<b>√</b>
8 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		<b>✓</b>
a b	The governing body?	8a 8b	<b>√</b>	
9 Section	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.  on B. Policies (This Section B requests information about policies not required by the Internal Reven	9 ue C	nde )	✓_
		40.0	Yes	No
10a b	Does the organization have local chapters, branches, or affiliates?	10a		<b>√</b>
11a	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .  Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	10b		
b	form?	11a	✓	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	12c	✓	
13	Does the organization have a written whistleblower policy?	13		<b>√</b>
14 15	Does the organization have a written document retention and destruction policy?	14		
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	<b>/</b>	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
b	with a taxable entity during the year?	16a		<b>✓</b>
Co st	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► North Carolina  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) for public inspection. Indicate how you make these available. Check all that apply.	s onl	y) ava	ulable
19	✓ Own website ☐ Another's website ☐ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of and financial statements available to the public.	f inte	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Annie C Marion, King Street, Boone, NC 28607 828-355-9655	of the	)	

	Officers Directors Tructors Voy Employees and Highest Companyated Employees	
	Check if Schedule O contains a response to any question in this Part VII	
•	and Independent Contractors	
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	
	-,	yc.

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	atio	n c	ompe	nsa	ted any currer	it officer, director	, or trustee.
(A)	(B) (C)						(D)	(E)	(F)	
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tr	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Carl Clawson, Chairman of Board 140 Woods Lane, Banner Elk, NC 28604	3	1						0	o	0
(2) Terrie Blevins, Treasurer 489 Trivette Branch Road, Boone, NC 28607	3	1						o	0	0
(3) Dickson B Hendley, President & Founder 234 Harrison Lane, Boone, NC 28607	40	1		1	1	1		42000	0	0
(4) Jeff Hendley 236 Harrison Lane, Boone, NC 28607	- 1	1						o	0	O
(5) James Kenneth Isaacs P O Box 1607, Boone, NC 28607	1	1						o	o	O
(6) Susan Horne, Secretary Ivy Lane, Boone, NC 28607	1	1						o	0	O
(7) Leonard Blevins 489 Trivette Branch Road, Boone, NC 28607	- 1	1						o	0	0
(8) Annie Marion, Vice President 537 Oak Street, Boone, NC 28607	40			<b>√</b>				34,999	0	0
(9)	_									
(10)										
(11)										
(12)	-									
(13)	-		_							
(14)		-								
(15)	_									_
(16)									-	

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
•	(A)	(A) (B) (C) (D)							(E)		(F)		
	Name and title	Average hours per week (describe hours for related organizations in Schedule O)	Individual to or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	arr com fro orga and	timated ount of other oensation om the anization irelated nizations	
(17)													_
(18)													_
(19)								-		<u></u>			_
(20)								_					_
(21)								-					
(22)													_
(23)				<u> </u>									_
(24)													_
(25)													_
(26)													_
(27)													_
(28)													_
1b	Sub-total		<u> </u>		<u> </u>		<u> </u>		69,683	0			0
c	Total from continuation sheets to Part		n A	:			•	•	03,003				_
d		<u>.</u>						<b>&gt;</b>	69,683	0			0
2	Total number of individuals (including but	not limited	to th	ose	lıst	ed a	above	e) w	ho received m	ore than \$100,0	00 in		
	reportable compensation from the organi	zation >										TvTai-	_
3	Did the organization list any <b>former</b> of employee on line 1a? If "Yes," complete 5							emp	oloyee, or high	est compensat	I	Yes No	<u>'</u>
4	For any individual listed on line 1a, is the	sum of re	portal	ble (	con	per	nsatio					<b>√</b>	٦
	organization and related organizations individual	·									4	<b>/</b>	
5	Did any person listed on line 1a receive of for services rendered to the organization?									zatıon or individu 	ıal	1	لـ
Section	on B. Independent Contractors									_			
1	Complete this table for your five highest compensation from the organization.	compensat	ed ind	dep	end	ent	contr	acto	ors that receive	ed more than \$1	00,000 o	f	
	(A) Name and business add	ress							(B) Description of s	ervices	(C) Compen		
None													_
													_
								-					
							<del></del>			<del>-</del>		<del></del>	-
2	Total number of independent contractor received more than \$100,000 in compens								ose listed abo	ove) who			

Part	VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated campaigns 1a				
gifts, grants lar amounts	b	Membership dues 1b				
ğ E	С	Fundraising events 1c				
iffs	d	Related organizations 1d				
nie 3,	е	Government grants (contributions) 1e	1			
sir sir	f	All other contributions, gifts, grants,	-			
ig et	•	and similar amounts not included above 1f 538,32	,			
달달	_	Noncash contributions included in lines 1a-1f. \$ 7,25:	<b>⊣</b> .			
Contributions, gifts, grants and other similar amounts	g					
	<u>h</u>	Total. Add lines 1a–1f	545,580	··· · · · ·		
Program Service Revenue	_	Business Code	<u> </u>		-	
- ee	2a					
e e	b					
ا څ	С					
Ser	d					
ᇤ	е					
ogu	f	All other program service revenue .			L	
<u>_</u>	g	<b>Total.</b> Add lines 2a–2f ▶	0			
	3	Investment income (including dividends, interest,			}	
		and other similar amounts) ▶				
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross Rents				
	b	Less. rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Securities (ii) Other		<del></del>		
		assets other than inventory				
	b	Less: cost or other basis				
		and sales expenses .				
	С	Gain or (loss)	-			
	d	Net gain or (loss)				· · · · · · · · · · · · · · · · · · ·
	_					
ne	8a	Gross income from fundraising				
enue		events (not including \$				
		of contributions reported on line 1c).				
Other R		See Part IV, line 18 a				
ţ	b	Less: direct expenses b	┨			
0		Net income or (loss) from fundraising events .	<del></del>			<u> </u>
		Gross income from gaming activities.	<del> </del>		<del> </del>	-
		See Part IV, line 19 a				
	ь	Less: direct expenses b	-			
		Net income or (loss) from gaming activities	<del>                                     </del>			
		Gross sales of inventory, less	<del>- </del>			,
	.04	returns and allowances a				
	ь	Less: cost of goods sold b	-			
	C	Net income or (loss) from sales of inventory .	<del></del>			
	<del>- '</del>	Miscellaneous Revenue Business Code	<del>                                     </del>			-
	11a	<del></del>	-			<del></del>
			+	-		<del> </del>
	b					<del>                                     </del>
	C	All other revenue	+		<del> </del>	
	d	All other revenue	_			<del>                                     </del>
	12	Total. Add lines 11a–11d ▶  Total revenue. See instructions ▶	545 590			<del> </del>
	12	Total revenue: See Instructions	545,580		1	i

### Part IX Statement of Functional Expenses

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

	All other organizations must complete col	umn (A) but are not		te columns (B), (C), a	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,500	2,500		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	285,746	285,746		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	76,999	51,275	9,624	16,100
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 8	Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	24,503	12,922	6,026	5,555
9	Other employee benefits	15,153	6,411	3,749	4,993
10	Payroll taxes	7,865	4,880	1,328	1,657
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				<del>-</del> -
f	Investment management fees				
g	Other	300	300		
12	Advertising and promotion	2,820	o	729	2,091
13	Office expenses	28,547	2,808	17,584	8,155
14	Information technology				<u> </u>
15	Royalties			-	
16	Occupancy	12,267	3,067	7,974	1,226
17	Travel	31,942	16,065	4,317	11,560
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			7,23	
19	Conferences, conventions, and meetings .				
20	Interest				- · · ·
21	Payments to affiliates				., .
22	Depreciation, depletion, and amortization .	4,349	0	4,349	0
23	Insurance	599	0	599	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) are such last less 24f expenses as Cabadala C).				
	(A) amount, list line 24f expenses on Schedule O.)				
a	Licenses & fees	1,475	0	1,225	250
b	Education Awareness	12,302	0	152	12,150
C	Emergency relief	428	428	0	0
d	Project supplies & materials	9,536	9,534	0	2
e •	All other expenses				
95	All other expenses  Total functional expenses. Add lines 1 through 24f	E47 220	205.025	F3 650	00 300
25		517,330	395,935	57,656	63,739
26	Joint costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Р	art X	Balance Sheet			
	_		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	165,025	1	189,576
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key		1	
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
Assets		employers and sponsoring organizations of section 501(c)(9) voluntary		i_	
		employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
٩	8	Inventories for sale or use	3,575	8	3,023
	9	Prepaid expenses and deferred charges		9	62
•	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 21.268			
	b	Consider Dasis. Complete Part VI of Schedule D 10a 21,268 Less: accumulated depreciation 10b 9,640	6,949	100	11,628
	11	Investments—publicly traded securities	- 0,040	11	11,020
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	175,549	16	204,289
	17	Accounts payable and accrued expenses	2,094	17	2,84
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Ě	22	Payables to current and former officers, directors, trustees, key			
Liabilities		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		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Organizations that follow SFAS 117, check here ▶ ☐ and complete	2,094	26	2,584
Ses		lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets	114,739	27	111,784
Bal	28	Temporarily restricted net assets	58,716	28	89,921
ᅙ	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
ts (	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ϋ́	32	Retained earnings, endowment, accumulated income, or other funds.		32	
Š	33	Total net assets or fund balances	173,455	33	201,705
_	34	Total liabilities and net assets/fund balances	175,549	34	204,289
					- 000

Form 99	90 (2010)			Pa	ige <b>12</b>
Par	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		54	<u>5,58</u> 0
2	Total expenses (must equal Part IX, column (A), line 25)	2		51	7,330
3	Revenue less expenses Subtract line 2 from line 1	3		2	8,250
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17	3,455
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		20	1,705
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				. 🗆
1	Accounting method used to prepare the Form 990:  Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain ır	ī	Yes	No
2a b	Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant?		2b		<b>√</b>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent accounts.	ntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain ir	ו		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolidated basis, or both:	ar were			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth ir	1 3a		

**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

Form **990** (2010)

#### 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.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Name of the organization Employer identification number 20-8877288

Pai	rt I Reason fo	or Public Chai	rity Status (All orga	nizations	s must c	omplete	this par	t.) See ir	nstructio	ns.
The	e organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)									
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	A school descr	ribed in <b>section</b>	170(b)(1)(A)(ii). (Attac	h Schedu	ule E.)					
3 4	A medical rese		spital service organiza on operated in conjunc e:						)(b)(1)(A)	(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 7	=									
8	☐ A community t	rust described in	n section 170(b)(1)(A)	(vi). (Con	nplete Pa	ırt II.)				
9	An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
10	•	•	operated exclusively		•	-			•	
11	purposes of o 509(a)(3). Che	ne or more pub ck the box that o	d operated exclusive licly supported organ describes the type of s	nizations of supporting	described g organiz	d in secti zation and	on 509(a d comple	i)(1) or se te lines 1	ction 509	9(a)(2). See <b>section</b> gh 11h.
	a 🗌 Type	1 b 🗆	Type II c	□ Тур	e III-Fund	ctionally ı	ntegrated	d	<b>d</b> [	Type III-Other
е		ndation manage	that the organization ers and other than one							
f			written determination			that it is		I, Type I	I, or Typ	
g		17, 2006, has tl	ne organization accer					ny of the	• • •	📙
	(i) A person v	who directly or i	ndirectly controls, eithody of the supported o						d in (11) ar	
	* *			_						11g(ı)
	• •	-	on described in (i) abo							11g(ii)
			a person described in							11g(m)
h	Provide the fol	llowing informati	on about the supporte	ed organı	zation(s).			,		
(1)	Name of supported organization	(iı) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	rganization sted in your document?	the organ	ou notify lization in of your port?	organizat (i) organiz	s the ion in col zed in the S ?	(vii) Amount of support
				Yes	No	Yes	No	Yes	No	
(A)										
(B)										
(C)										
(D)										
(E)										
							-			

Schedule A (Form 990 or 990-EZ) 2010 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not		140,553	173,511	309,406	545,580	1,169,050
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge			-			
4	Total. Add lines 1 through 3		140,553	173,511	309,406	545,580	1,169,050
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						7,347
6	Public support. Subtract line 5 from line 4.						1,161,903
	on B. Total Support						1,101,000
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4		140,553	173,511	309,406	545,580	1,169,050
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		o	37	122	0	159
9	Net income from unrelated business activities, whether or not the business is regularly carried on					-	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.  First five years. If the Form 990 is for th	•				12 ear as a section	<b>1,169,209</b>
	organization, check this box and stop her	•			•		
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2010 (line 6	i, column (f) d	ıvıded by lıne 1	1, column (f))		14	%
15	Public support percentage from 2009 Sch					15	<u>%</u>
16a							
L	box and <b>stop here.</b> The organization qual			_			_
b	331/3% support test—2009. If the organicheck this box and stop here. The organi					15 18 33 73%	or more, ▶ □
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization mee Part IV how the organization meets the "fa	olo. If the organists the "facts-acts-and-circle	anızation dıd no and-cırcumsta umstances" tes	ot check a box nces" test, che st. The organiza	on line 13, 16 eck this box ar ation qualifies	a, or 16b, and l	ine 14 is xplain in ipported
b 18	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	009. If the orgain meets the eets the "fact	anization did no e "facts-and-ci s-and-circums	ot check a box rcumstances" tances" test. T	on line 13, 16 test, check the he organizatio	ia, 16b, or 17a, ns box and <b>sto</b> n qualifies as a	and line op here. publicly
	instructions						· <u>▶</u> □

#### 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. If the organization fails to qualify under the tests listed below, please complete Part II.)

	in the organization rails to quality	under the te	solo libited bei	ow, piease co	Jilipiele Fart	<u> </u>	
	on A. Public Support	(-) 0000	4.5000	(.) 6222	T ( n cooo	4.36040	
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees			1			
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise						
2	sold or services performed, or facilities			1			
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose			ļ			
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	<del></del>					
4	Tax revenues levied for the						
	organization's benefit and either paid					•	
_	to or expended on its behalf		ļ				
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
_	_						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3		-				
ıa	received from disqualified persons .						
L	· · · · · ·						
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6)						
Secti	on B. Total Support				<u> </u>		L
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	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						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	and 12.)	o organization	n'o firet	المناط المناط	0 f.ftl- 1		504(-)(0)
14	First five years. If the Form 990 is for the organization, check this box and stop he	re organizatio re	n s iirst, secon	ia, inira, tourtr	i, or iiith tax ye	ear as a section	on 501(c)(3)
Secti	organization, check this box and stop he on C. Computation of Public Suppor			• • • • •	• • •	• • • •	
15	Public support percentage for 2010 (line			3 column (f)		15	%
16	Public support percentage from 2009 Sci					16	
	on D. Computation of Investment In	come Perce	ntage	· · · · ·	<u> </u>		
17	Investment income percentage for 2010 (			y line 13. colui	mn (f))	17	%
18	Investment income percentage from 2009					18	<del></del>
19a	331/3% support tests-2010. If the organ	ization did not	check the box	x on line 14, a	nd line 15 is m	ore than 331/31	%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2009. If the organiz	ation did not o	check a box on	line 14 or line	19a, and line 16	s is more than 3	33 <sup>1</sup> /3%, and
	line 18 is not more than 331/3%, check this	box and <b>stop i</b>	<b>nere.</b> The organ	ization qualifies	as a publicly s	upported orgar	nization 🕨 🔲
20	Private foundation. If the organization di						

	orm 990 or 990-EZ) 2010	Page 4
Part IV	<b>Supplemental Information.</b> Complete this part to provide the explanations required by Part II, line 10 Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
Part III, line	e 1 column (d) 2009 does not include unusual grant in amount of \$68,419	

#### SCHÈDULE D (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2010 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Wine	o Water	20-7788288	
Par	Organizations Maintaining Donor Advised Funds or Other Similar Fund- organization answered "Yes" to Form 990, Part IV, line 6.	s or Accounts. Complete i	fthe
	(a) Donor advised funds	(b) Funds and other accounts	
1	Total number at end of year		
2	Aggregate contributions to (during year) .		_
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	<del></del>	
5	Did the organization inform all donors and donor advisors in writing that the assets help	ld in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	?	☐ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant only for charitable purposes and not for the benefit of the donor or donor advisor, or for conferring impermissible private benefit?	any other purpose	_ No
Part	Conservation Easements. Complete if the organization answered "Yes" to	Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).		-
	<ul> <li>Preservation of land for public use (e.g., recreation or education)</li> <li>Preservation of a</li> </ul>	an historically important land a	rea
	☐ Protection of natural habitat ☐ Preservation of a	a certified historic structure	
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution easement on the last day of the tax year.	in the form of a conservation	
		Held at the End of the 1	Tax Year
а	Total number of conservation easements	. 2a	
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic structure included in (a)		
d	Number of conservation easements included in (c) acquired after 8/17/06, and not or		
_	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, released, extinguished, or terminatax year ►		ng the
4	Number of states where property subject to conservation easement is located ▶		
5	Does the organization have a written policy regarding the periodic monitoring, inspec	ection, handling of	□No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ea		
	L	acomonic during the year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easerr  \$ \inc \\$\$	nents during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	section 170(h)(4)(B)	
•	(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · Yes	□No
9	In Part XIV, describe how the organization reports conservation easements in its revenue a balance sheet, and include, if applicable, the text of the footnote to the organization's final organization's accounting for conservation easements.	and expense statement, and	_
Part	<u> </u>	Other Similar Assets	
r at t	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Juler Silmar Assets.	
4-			
ıa	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its riworks of art, historical treasures, or other similar assets held for public exhibition, edu-		
	public service, provide, in Part XIV, the text of the footnote to its financial statements that	describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, edupublic service, provide the following amounts relating to these items:	ucation, or research in furthera	ance of
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$	
	(ii) Assets included in Form 990, Part X	▶ \$	
2	If the organization received or held works of art, historical treasures, or other similar a following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.	assets for financial gain, prov	ide the
а	Revenues included in Form 990, Part VIII, line 1	▶ \$	
b	Assets included in Form 990, Part X		

Schedule I	D (Form	990)	2010

Part	Organizations Maintaining	Collections of	Art, His	torical	Treasures,	, or Oth	ner Similar As	sets (cor	itinued)
. 3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, che	ck any of th	e follow	ing that are a s	gnificant	use of its
а	☐ Public exhibition		d		an or exchai	nae nrod	nrams		
b	Scholarly research		e	_					
	Preservation for future generation		e	Ot					
С 4	Provide a description of the organizar		and aval	an how	thay further	the era	anization's avon	ant nurno	o in Dort
4	XIV.	don's collections	anu expi	aiii iiow	mey furmer	trie orga	anization's exem	ipt purpo:	e III Fait
5	During the year, did the organization	solicit or receive	donation	s of art	historical tr	easures	or other simila	ır	
•	assets to be sold to raise funds rather								i □ No
Dart	IV Escrow and Custodial Arra								
rait	line 9, or reported an amour				gariizatiori	answer	ed les lord	1111 330, 1	-artiv,
	Is the organization an agent, trustee				for contribut	ions or	other assets no	ot .	
	included on Form 990, Part X?							_	. □ No
b	If "Yes," explain the arrangement in P								
	, ,	•		Ū			Aı	nount	
С	Beginning balance					1c		_	-
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amou							☐ Yes	□ No
b	If "Yes," explain the arrangement in P	art XIV.							
Par	V Endowment Funds. Compl	ete if the organi	zatıon ar	nswered	d "Yes" to F	orm 99	0, Part IV, line	10.	
		(a) Current year	<b>(b)</b> Pr	or year	(c) Two year	s back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year balance			·					
b	Contributions								
С	Net investment earnings, gains, and								
	losses					_			
d	Grants or scholarships								
е	Other expenditures for facilities and				ĺ				
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of			as:					
а	Board designated or quasi-endowme	nt ▶	%						
b	Permanent endowment ▶	%							
C	Term endowment ▶%	•							
3a	Are there endowment funds not in th	e possession of t	he organ	zation th	nat are held	and adr	nınıstered for th		
	organization by:							\	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organ							3b	
4	Describe in Part XIV the intended use								
Part				1					
	Description of investment	(a) Cost or o			or other basis (other)		ccumulated preciation	(d) Book	value
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment				2,1268		9,640		11,628
e	Other	•		<u> </u>					
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	990, Part	X, colum	nn (B), line 10	)(c).) .	▶		11,628

Part VII	Investments—Other Securities	. See Form 990, Part X	, line 12.	
(	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value Cost or end-of-year m	
	al derivatives			
	-held equity interests			<u> </u>
(3) Other				
(A)				
(B)				
(C) (D)				<del></del>
(E)				
···(F)			<del></del>	
(G)				<del></del>
(H)				
(I)	<u>-</u>			
	n (b) must equal Form 990, Part X, col. (B) line 12 )			
Part VIII	Investments – Program Related	J. See Form 990, Part	X, line 13.	<u>.</u>
	(a) Description of investment type	(b) Book value	(c) Method of val	
(1)	· · · · · · · · · · · · · · · · · · ·			
(2)				
(3)				
(5)				
(6)				· · · · · ·
(7)		<del></del>		,-
(8)				
(9)				
(10)				• • • • • • • • • • • • • • • • • • • •
	(b) must equal Form 990, Part X, col. (B) line 13.)	17.15		
Part IX	Other Assets. See Form 990, Pa	a) Description		(b) Book value
(1)	10	ay Description		(b) Book value
(1)				
(3)				
(4)	<del></del>			
(5)				
(6)		<u>.                                    </u>		
_(7)				
(8)				<u></u>
(9)		<del></del>		
(10)	lumn (b) must equal Form 990, Part X, c	ol (R) line 15.)		······································
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Amount		
(1) Federa	al income taxes		7	
(2)				
(3)				
(4)			_	
(5)				
(6)	<del></del>			
(7)				
(9)	• • • • • • • • • • • • • • • • • • • •		$\dashv$	
(10)			$\dashv$	
(11)		<del> </del>	$\dashv$	
	n (b) must equal Form 990, Part X, col. (B) line 25)		7	
	ASC 740) Footnote. In Part XIV, provide	the text of the footnote t	o the organization's financial staten	nents that reports the
organization	on's liability for uncertain tax positions u	ınder FIN 48 (ASC 740).	_	·

Schedu	e D (Form 990) 2010			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Staten	nents	
`1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	<del></del> ·
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine		10	
Part			r Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a	1 1	
b	Donated services and use of facilities	2b	7 .	
C	Recoveries of prior year grants	2c	7 .	
d	Other (Describe in Part XIV.)	2d		
e	•		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		150	··
a	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIV.)	4b	7	
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Part	XIII Reconciliation of Expenses per Audited Financial Staten			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	1 1	
b	Prior year adjustments	2b	1	
С	Other losses	2c	┦ ┃	
d	Other (Describe in Part XIV.)		7	
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b	7	
C	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, III		5	.=
Part	XIV Supplemental Information		•	
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII dditional information.			
		,		
				·

Schedule D (Fo	rm 990) 2010	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
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•••		
	······································	
		•

#### SCHEDULE F (Form 990)

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2010 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Wine to Water 20-8877288 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total expenditures for offices in the a program service, describe specific type of service(s) in region employees, agents region (by type) (e g, fundraising, program services, investments, region and independent and investments contractors in region grants to recipients located in the region) ın region (1) East Asia and the Pacific 0 0 Grant making 36,398 (2) Sub-Saharan Africa 0 0 **Grant making** 118,505 0 (3) Central America and Caribbean 0 **Grant making** 124,363 (4) South America 0 0 Grant making 6,480 (5) (6)(7) (8)(9) (10)(11)(12)(13)(14)(15)(16)(17)Sub-total . . . . . 0 0 285,746 Total from continuation sheets to Part 1 . . . .

c Totals (add lines 3a and 3b)

285,746

Schedule F (F	Schedule F (Form 990) 2010
Part II	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
	Part II can be duniticated if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	f organization (b) IRS code section and EIN (f) applicable)	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Central America	water filter	84,6000	84,6000 Wire tsfr			
(2)		Central America	water fitrs	39,764	39,764 Wire tsfr			
(3)		East Asia	wells	34,798	34,798 Wire tsfr			
(4)		So America	school well	6,480	6,480 Wire tsfr			
(5)		Subsahara	water fitrs	24,905	24,905 Wire tsfr			
(9)		Subsahara	wells	000'06	90,000 Wire tsfr			
(2)								
(8)								
(6)							_	
(10)								
(11)				-				
(12)					!			
(13)								
(14)								
(15)								
(16)								

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Schedule F (Form 990) 2010

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Раде **3** 

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2010

Part III Grants ar

(h) Method of valuation (book, FMV, appraisal, other)					:														Schedule F (Form 990) 2010
(g) Description of non-cash assistance																			Schedule
(f) Amount of non-cash assistance																		:	
(e) Manner of cash disbursement																			
(d) Amount of cash grant																			
(c) Number of recipients																			
of grant or assistance (b) Region (c) Number of recipients																			
(a) Type of grant or assistance	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

•			
Schedule	F (Form	990)	2010

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L'aue	4

Part	V 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 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)	☐ 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, 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	☑ No

# Schedule F (Form 990) 2010 Part V **Supplemental Information** Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); 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). Part I, line 2 - Organizations must submit a grant proposal, including objectives, indicators, and a budget. Recipient organizations must submit full reports, including photographs, of completed activities. Wine to Water staff regularly travel to sites to meet with partners and inspect completed and in-progress projects. Part 1, line 3 - All amounts reported have been paid. Wine to Water has no outstanding grant payment commitments. Part II, line 1 - All amounts reported have been paid. Wine to Water has no outstanding grant payment commitments.

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

# Supplemental Information to Form 990 or 990-EZ

2010

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Wine to Water

20-8877288

990 Part III 4d Other program services • Uganda Bio-Sand Filters/Uganda Training Center: Wine To Water partners with both a local community based organization called Connect Africa and Samaritan's Purse UK. Over the course of three years we have built four water and sanitation training facilities where bio-sand filters are made locally, using local materials. They also serve as a place where locals are trained on hygiene education, rain water containment and how to construct their own filters. With the knowledge locals gain at these centers they go back to their home villages and teach others. In 2010, 447 bio-sand filters were distributed reaching an estimated 3,576 beneficiaries.

Twenty-one hygiene promotion workshops were conducted with 1,438 people in attendance and 56 people were trained to be bio-sand

technicians. • Nashville, TN: In May 2010 WTW responded to the flooding in Nashville by partnering with Hands on Nashville in Tennessee.

Hands On Nashville is a huge volunteer force in Tennessee that rallies volunteers for emergency response. We were able to fund the distribution of bottled water to victims of the flood. • Peru: In 2009, Wine To Water partnered with Inca Link to install a well for an orphanage under construction in Trujillo. In 2010, once the orphanage was complete, we worked to install a water tower for the well. The water Tower/system allows the orphanage to easily access water from the well. • Sri Lanka: In Sri Lanka Wine To Water partners with an organization called Fridsro Immediate Relief. In 2010 we completed our first project working with them to dig a well in the Thoppigala region.
• Hands at Work, South Africa: Wine To Water partnered with Hands at Work on a project in Mufambiza, South Africa. There we drilled a well

for a facility that reaches out to local orphans in the community and teaches them valuable skills such as agriculture and gardening. Our

990 Part VI line 2 - Jeff Hendley, board member, and Dickson B. Hendley, President and founder, are father and son; Carl Clawson, chairman of the board, and Annie C Marion, Vice-President, are father and daughter; Leonard Blevins & Terrie Blevins, board members, are spouses.

990 Part VI line 11b - The 990 is distributed to board members and officers for review before submission to the IRS.

990 Part VI line 15a & b - The process for determining compensation for the top management official and other officers included researching and comparing the compensation range with comparable organizations.

990 Part VI line 19 - By-laws, quarterly financial statements, and annual 990 are posted on the Wine to Water website. These documents

well was the first well ever drilled in that community

are also available upon request.

Schedule O (Form 990 or 990-EZ) (2010)		Page <b>2</b>
Name of the organization  Wine to Water	Employer	identification number 20-7887788
990 Part VI Section B line 12C - As a general rule, every effort is made to avoid transactions with interested	d parties.	Transactions involving
interested parties are brought before the board for review and approval.		
	<b></b>	
······	<b></b>	
		<del></del>