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Department of the Treasury

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

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

OMB No 1545-0047 Open to Public Inspection

-	A F	or the	2010 calendar year, or tax year beginning	and ending				
į	B Cr ap	neck if plicable	C Name of organization		D Employer ide	entification	number	
	X	Address change	THE WATER PROJECT, INC.		_			
		Name change	Doing Business As		26	5-14555	510	
		Initial return Termin- ated	Number and street (or P.O. box if mail is not delivered to street address) 4 BICENTENNIAL SQUARE, THIRD FLOOR	Room/suite		umber 04-918-	-1804	
		Amend		.	G Gross receipts \$		1,032,	966.
		Applica	CONCORD, NH 03301		H(a) Is this a gro	oup return	·	, mm
		pending	F Name and address of principal officer:R • PETER CHASSE SAME AS ABOVE		for affiliates	37		X No
•	I Ta		mpt status: X 501(c)(3))(1) or 52	-	ach a list (se		
•			HTTP://THEWATERPROJECT.ORG	/(-/	H(c) Group exer			J. 1.5,
			organization: X Corporation Trust Association Other	L Year	r of formation: 200			ıcile: NC
	Pa	rt I	Summary					
,	0	1 E	Briefly describe the organization's mission or most significant activities: $\overline{ ext{TH}}$	E WATER	PROJECT,	INC.	IS	
	ž]	BRINGING RELIEF TO COMMUNITIES AROUND	THE WOR	LD WHO SUI	FER		
	Activities & Governance	2 (Check this box 🕨 📖 if the organization discontinued its operations or di	sposed of mor	e than 25% of its i	net assets.		_
	١٥	1 E	Number of voting members of the governing body (Part VI, line 1a)			3		4
	8		Number of independent voting members of the governing body (Part VI, line	1b)		4		4
	ies		Total number of individuals employed in calendar year 2010 (Part V, line 2a)			5		10
	ξį		Total number of volunteers (estimate if necessary)	•		6	_	0.
	Ac		Fotal unrelated business revenue from Part VIII, column (C), line 12		•	7a 7b		0.
m	\dashv	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34		Prior Year		Current Ye	
SCANNED		8 (Contributions and grants (Part VIII, line 1h)	-	437,93		1,022,	
3	Revenue		Program service revenue (Part VIII, line 2g)	—	20,75	0.		0.
Ž	š		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>		51.		292.
П	~		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,88		6,	457.
	1		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	12)	441,8		1,029,	469.
AUG			Grants and similar amounts paid (Part IX, column (A), lines 1-3)		191,6	76.	825,	743.
			Benefits paid to on for members (Part IX selumn (A), Ine 4)			0.		0.
2	တ္ထ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5	·10) _		0.	97,	360.
	Sus	16a 1	Professional fundraising fees (Part X column (A), Iffe 11e)		13,4	47.		0.
2011	Expenses	b	· · · · · · · · · · · · · · · · · · ·	<u>,571.</u>	<u> </u>			<u> </u>
_	ш		Other expenses (Part X, column (A), lines 11a-11d, 1 f-24f)	- ⊢	24,00			,588.
			Total expenses. Add line 13-17 (hust equal Fart IX, column (A), line 25)	<u> </u>	229,20		1,001,	
	or ses	19	Revenue less expenses: Subtract line 18 from line 12		212,60 Deginning of Current		-	,778 .
	ance	~	Tetal cocata (Dart V. line 16)	 -	234,9		End of Ye	ar , 733.
	Net Assets Fund Balanc		Total assets (Part X, line 16) Total liabilities (Part X, line 26)	<u> </u>	454,5.	0.		0.
	Net/ und		Net assets or fund balances. Subtract line 21 from line 20		234,9		262	733.
	Pa		Signature Block					
			Ities of perjury, I declare that I have examined this return, including accompanying sche	edules and state	ments, and to the bes	t of my know	ledge and be	elief, it is
	true,	correc	t, and complete. Declaration of afeparer other than officer) is based on all information	of which prepare	er has any knowledge	; / , _		
			Me WILL		7	115/20	3/	
	Sign	1	Signature of officer		Date '	• /	•	
	Her	е	R. PETER CHASSE, PRESIDENT					
			Type or print name and title		In the late	t- T TT	DTIN	
	D-11		Print/Type preparer's name Preparer's signature	<i></i>	Date		PTIN	
	Paid		LEAH R MAYBRY Firm's name ELLIOTT DAVIS, PILC	yuy.		f-employed		_
	-	arer Only	Firm's name ELLIOTT DAVIS, PLLC Firm's address 700 EAST MOREHEAD STREET, SUI	TE 400	Firm's El	.IV		
	096	Jiiiy	CHARLOTTE, NC 28202	70 -30V	Phone n	704-	333-88	381
	May	the IF	RS discuss this return with the preparer shown above? (see instructions)		11 11011611		X Yes	□ No
			,, (DUD) - (DU					

LHA For Paperwork Reduction Act Notice, see the separate instructions. 032001 02-22-11

Form **990** (2010)

Form 990 (2010) THE WATER PROJECT, INC.
Part IV, Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			l
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
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	_		
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	١		.,,
44	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable Did the ergogration report on amount for land, buildings, and equipment in Part V. Fig. 100 // BVos B. constant C. facture D.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	م ا	v	ŀ
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	Х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	446		v
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		X
Ü	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		х
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	11c		<u> </u>
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	L
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	X	
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		X
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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
ь	,			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	000	

Form 990 (2010) THE WATER PROJECT, INC.

Part IV 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		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	, , , , , , , , , , , , , , , , , , ,			:
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			l .
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	1		
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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			v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		X
20	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		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
_	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_		Х
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		,,	
	Note. All Form 990 filers are required to complete Schedule O	<u>38</u>	990	0040
		rorm	タフリ)	2U IU)

Form 990 (2010) THE WATER PROJECT 26-1455510 Page 5 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 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 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 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За X 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)? X 4a b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Peport 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 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

-		_50	1
С	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 \$100,000, and did the organization solicit		
	any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		
	were not tax deductible?	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 and services provided to the payor?	7a	Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		
	to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	 X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	0	7h	 X
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 organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	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		
11	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders] !	
b	Gross income from other sources (Do not net amounts due or paid to other sources against		
	amounts due or received from them)]	ŀ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year]	ļ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 <u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.		
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	1 /	ı

14a

13c

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

INC. Form 990 (2010) THE WATER PROJECT. 26-1455510 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? X 3 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? X 5 6 Does the organization have members or stockholders? X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? X 8a **b** Each committee with authority to act on behalf of the governing body? Х 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Does the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give use 12b X 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 Does the organization have a written whistleblower policy? 13 Х 13 14 Does the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization X 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 with a taxable entity during the year? X 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Own website ____ Another's website X Upon request

03301

statements available to the public.

R. PETER CHASSE - 704-918-1804

4 BICENTENNIAL SQUARE, THIRD FLOOR, SUITE 3, CONCORD,

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

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

Check if Schedule O contains a response to any question 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.

(A) Name and Title	(B) Average hours per week	Individual trustee or director		Pos		app	ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	(describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
R. PETER CHASSE	F0 00			.,				70 000	0	12 260
PRESIDENT	50.00			A	X	A	_	70,000.	0.	13,268
MICHAEL D. BALLOU	0.50			x		1		0.	0.	0.
SECRETARY	0.50	-	-	^			_		<u> </u>	0.
ROB HUDIBURG	0.50		İ	x		l		0.	0.	0.
TREASURER DAVID W. MYERS	0.50			^	_	一		•		
CHAIRMAN	0.50			X				0.	0.	0
			-		-					

rar	VII. Section A. Officers, Directors, Tr		mpk	yee	s, a	nd l	High	<u>est</u>	Compensated Employ	ees (continued)	-			
	(A)	(B)			•)			(D)	(E)			(F)	
	Name and title	Average	,_,		Pos			ı. A	Reportable	Reportable			imate	-
		hours per week (describe hours for related organizations in Schedule	istee or director	Institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	s	comp fro orga and	ount on other pensate om the unization relate nization	cion e on ed
			Ë	<u> </u>		-	-	_						
												-		
			_	_		_	-	_						
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		ļ <u> </u>	_	ļ	_		_							
1b	Sub-total .		Ь	<u>'</u>	<u>L</u>	l		·	70,000.		0.	1:	3,20	68.
	Total from continuation sheets to Part \	/II, Section A							0.		0.	4 .		0.
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but	not limited to the	nose	liste	ed a	bov	e) w	no re	70,000. eceived more than \$100	0.000 in reportabl	0. e		3,20	00.
	compensation from the organization									· ,				0
3	Did the organization list any former office	r director or tri	istee	ke	v en	nla	vee	or h	nahest compensated er	mnlovee on	ı		Yes	No
Ū	line 1a? If "Yes," complete Schedule J for			, 110	, 0.,	٠,٥٠٥	,,,	0, ,	· · ·			3		X
4	For any individual listed on line 1a, is the								•	the organization				•
5	and related organizations greater than \$19 Did any person listed on line 1a receive or			•						Idual for services		4		<u> </u>
	rendered to the organization? If "Yes," con					-						5		X
	Complete this table for your five highest o	omponented in	don						that received many them	\$100,000 of one				
1	Complete this table for your five highest of the organization. NONE	ompensateu in	aep	Bride	ent c	oni	racti	ors t	nat received more trian	\$100,000 of con	ipens	ation ti	om	
	(A) Name and busines	e addrese							(B) Description of s	200,000	<u></u>	(C omper		
	Name and busines	5 address						+	Description of s	SEI VICES		omper	Sation	<u>'</u>
								_						
								\dashv						
	Total an about 1 and 2 a	Good and a second			مقاهر	A I-			1 ab ana) mb	Ab	-			
2	Total number of independent contractors \$100,000 in compensation from the organ	-	iot li	mite	:a to		ose II O	sted	above) who received h	nore than				
												Form	200	2010

Part VIII Statement of Revenue

(D) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated tax under sections 512, 513, or 514 exempt function business revenue revenue 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 022,720 similar amounts not included above 9,150 Q Noncash contributions included in lines 1a-1f \$ 022,720 Total, Add lines 1a-1f **Business Code** Program Service f All other program service revenue q Total, Add lines 2a-2f Investment income (including dividends, interest, and 292. 292. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 9,954 and allowances 3,497 **b** Less cost of goods sold 6,457. 6,457. c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d 029,469. 6,457. 0. 292. Total revenue See instructions. 032009 12-21-10 Form 990 (2010)

Form 990 (2010) THE WATER PROJECT, INC. Part IX Statement of Functional Expenses

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

	All other organizations must com	plete column (A) but are			
	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	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,	-			
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	825,743.	825,743.		
4	Benefits paid to or for members .				
5	Compensation of current officers, directors,				
	trustees, and key employees	70,000.	35,000.	17,500.	17,500.
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	8,183.		8,183.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	13,268.	6,634.	3,317.	3,317.
10	Payroll taxes	5,909.	2,645.	1,941.	1,323.
11	Fees for services (non-employees):				
а	Management				
b	Legal	7,690.		7,690.	
С	Accounting	5,492.		5,492.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	22,617.	21,767.	300.	550.
12	Advertising and promotion .	733.			733.
13	Office expenses	10,261.	1,604.	2,603.	6,054.
14	Information technology				
15	Royalties .				
16	Occupancy .				
17	Travel	2,124.	2,124.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance .	1,597.		1,597.	
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)				
	amount, list line 24f expenses on Schedule O.)				
а	BANK FEES	9,752.		1,862.	7,890.
b	WEBSITE EXPENSES	7,733.	5,800.		<u> </u>
С	PRINTING AND COPYING	5,271.			5,271.
d	FACILITIES AND EQUIPMEN	4,453.		4,453.	
е	MISCELLANEOUS EXPENSES	865.		865.	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,001,691.	901,317.	55,803.	44,571.
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				

Par	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	173,081.	1	44,099.
	2	Savings and temporary cash investments	13,996.	2	173,278.
	3	Pledges and grants receivable, net	47,878.	3	39,703.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		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		ŀ	
	ļ	employers and sponsoring organizations of section 501(c)(9) voluntary			
G		employees' beneficiary organizations (see instructions)		_6	
Assets	7	Notes and loans receivable, net		_7	
As	8	Inventories for sale or use		_8	1,353.
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D 10a 4,300.	•		4 200
		Less: accumulated depreciation 10b	0.	10c	4,300.
	11	Investments - publicly traded securities		11	
	12 13	Investments - other securities. See Part IV, line 11		12	
	14	Investments - program-related. See Part IV, line 11 Intangible assets		13	
	15	Other assets. See Part IV, line 11		14 15	***
	16	Total assets. Add lines 1 through 15 (must equal line 34)	234,955.	16	262,733.
	17	Accounts payable and accrued expenses	234,555	17	202,733.
	18	Grants payable	 	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iabi		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	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117, check here			
səc		lines 27 through 29, and lines 33 and 34.	FF 024		040 601
ļau	27	Unrestricted net assets	55,031.	27	248,691.
Ва	28	Temporarily restricted net assets	179,924.	28	14,042.
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117, check here and			
8	20	complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
t As	31	Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		31 32	
Š	33	Total net assets or fund balances	234,955.	33	262,733.
	34	Total liabilities and net assets/fund balances	234,955.	34	262,733.
	, 4	- The made in the added for a data food	<u> </u>	_ 	Eorm 990 (2010)

·orm	1990 (2010) THE WATER PROJECT, INC.	20-14	DDDTU	Pag	ge I∠
Pa	rt XI 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	1,029	9, 4	<u>69.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,00	1,6	91.
3	Revenue less expenses. Subtract line 2 from line 1	3	2	7,7	78.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	234	4,9	55.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
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	262	2,7	33.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	i i		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	9 90 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2010
Open to Public

Inspection

Name of the organization

THE WATER PROJECT, INC. Employer identification number 26-1455510

Par	t I	Reason 1	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t.) See inst	tructions.				
he o	rganı			because it is: (For lines									
1 [A church, cor	nvention of churches	s, or association of chur	ches desci	ribed in se	ction 170	(b)(1)(A)(i)	١.				
2 ['0(b)(1)(A)(ii). (Attach Sc				V-7V-7V-7V-7	,-				
3 [tal service organization		n ection	170(b)(1)	(AV(iii)					
4	一			operated in conjunction					/hV1VAVii	i) Enter th	e hospital	's nam	6
7 .		city, and state			***************************************	pital acco	.500 50		(~)(·)(~y(·	1). Entor th	o moopha	o main	- ,
5 [•		benefit of a college or un	niversity ov	wned or or	perated by	a doverni	mental uni	t described	d in		
J [(b)(1)(A)(iv). (Comple		involuty of	whice or or	crated by	a governi	incina un	i describer	<i>.</i>		
ا م					+ dooonbo	d .m = = = #:=	- 470/b\/-	41/ 4 1/ 4					
6 L	₹			ent or governmental unr					6 41		حجمام مراطاء		_
, ,	لم	=	•	eives a substantial part	or its supp	ort from a	governme	ental uriit C	or irom trie	general pi	JDIIC Gesc	nbea ii	1
ا م	\neg		b)(1)(A)(vi). (Comple		(Camalata	Dort II.							
8 [=			section 170(b)(1)(A)(vi).								4 4	
9 L				eives: (1) more than 33									
				nctions - subject to certa							_		
				axable income (less sect	uon 511 ta	x) irom bu	sinesses a	acquired b	y the orga	inization at	ter June 3	U, 197	5 .
ا م			509(a)(2). (Complete	•			.	F00(-\/.	41				
10 L	=			perated exclusively to te									
11 L		-	-	perated exclusively for the		•					•		or
				ations described in secti				2). See se	ction 509(a)(3). Chec	K the box	tnat	
				_	_	-				<u>, </u>	Turne III. (M	
_ [• •		• •							•		_
eι		•	•	•		-	-	-					n
			-	·		-				e(a)(1) or se	ection 508	(a)(2).	
t					the INS tha	atitisaiy	pe i, Type	ii, or iype	e III				
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g									_			<u> </u>	
			·		ione or tog	etner with	persons o	jescribed	ın (II) and (iii) below,	14.00	Yes	NO
		-			,								
						-0							,
		• •	•	•	• •					•	[11g(iii)	L	
h		Provide the fe	ollowing information	about the supported or	ganization	(S).							
	-			/iii) Type of	h				1,21	, the			
(i) l			(ii) EIN						lorganizati	on in col. l	(vii) An	ount o	f
	orga	inization		(described on lines 1-9					(i) organiz	ed in the	sup	port	
						····				, 			
				(see manuchons))	res	NO	res	NO	res	NO			
					 			 	 	 			
					-		 	 	 				
								1	-				
		_	iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). [supported (ii) EIN (iii) Type of organization organization in col. (v) Did you notify the organization in col. (vii) Amount of organization in col. (viii) Amount of organization in col. (viii) Amount of organization in col. (viii) Amount of organization in col.										
							ļ	 		 			
r_e-		Provide the following information about the supported organization(s). ame of supported organization (iii) EIN (iii) Type of organization (iii) Is the organization (v) Did you notify the organization in col. (i) Is the organization in col. (i) organization in col. (ii) organization in col. (iii) EIN (vii) Is the organization in col. (i) organization in col. (ii) organization in col. (ii) organization in col. (iii) EIN (viii) Amount of organization in col. (iii) EIN (viii) Amount of organization in col. (iii) EIN (viii) Amount of organization in col. (iii) EIN (viii) Amount of organization in col. (iiii) EIN (viii) EIN (viiii) EIN (viiiii) EIN (viiiii) EIN (viiiii) EIN (viiiiiii) EIN (viiiiiiii) EIN (viiiiiiiii) EIN (viiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii											

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

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 THE WATER PROJECT, INC. 26-1455510 Page 2

Part II | 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)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	I		83,943.	437,993.	1022720.	1544656.
2	Tax revenues levied for the organ-					•	
	ization's benefit and either paid to	i		1			
	or expended on its behalf			<u> </u>			
3	The value of services or facilities						_
	furnished by a governmental unit to					:	
	the organization without charge						
4	Total. Add lines 1 through 3			83,943.	437,993.	1022720.	1544656.
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)						
	Public support. Subtract line 5 from line 4						1544656.
Seg	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4			83,943.	437,993.	1022720.	1544656.
8	Gross income from interest,	1					
	dividends, payments received on	1					
	securities loans, rents, royalties						
	and income from similar sources .				51.	292.	343.
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.)				3,888.	_	<u>3,888.</u>
11	Total support. Add lines 7 through 10						<u>1548887.</u>
	Gross receipts from related activities,		•	•		12	9,954.
13	First five years. If the Form 990 is for		s first, second, the	rd, fourth, or fifth ta	ix year as a section	n 501(c)(3)	
80.	organization, check this box and stop ction C. Computation of Public	here	roontogo			·	▶X
	Public support percentage for 2010 (I		-	column (f))		14	<u>%</u>
	Public support percentage from 2009	· ·	•			15	<u> </u>
102	33 1/3% support test - 2010.If the or				4 IS 33 1/3% or m	ore, cneck this bo	x and
	stop here. The organization qualifies		-	•	 line 15 in 22 1/20/		▶
L	33 1/3% support test - 2009. If the or				III 15 IS 33 1/3%	or more, check th	is dox
17-	and stop here. The organization quali 10% -facts-and-circumstances test		=		 13 162 or 15h o	nd line 14 is 109/	or more
176	and if the organization meets the "fac	_					· ·
	meets the "facts-and-circumstances"					t iv now the organ	IIZALIUII
۲	10% -facts-and-circumstances test				-	7a and line 15 is :	10% or
٠.	more, and if the organization meets th						
	organization meets the "facts-and-circ				•		`
18	Private foundation. If the organization		-				, · · 【 片
	roundation, it the organizatio	Gid Hot Officer a	JON OF HIS TO, TO	مر, الالار الالار الالالالالا	, cricen trio box a	ing see monucilon	

Schedule A (Form 990 or 990-EZ) 2010 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)

Section A. Public Support	, p					 -
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not				1		
include any "unusual grants.")			<u> </u>			
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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		.				
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						-
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🖊	(a) 2006	(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						
c 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 (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here				•	()() - 3	. ,
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2010 (lii	ne 8, column (f) d	livided by line 13, o	column (f))		15	-
16 Public support percentage from 2009					16	
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20	10 (line 10c, colur	mn (f) divided by lii	ne 13, column (f))		17	
18 Investment income percentage from 2	.009 Schedule A,	Part III, line 17			18	
19a 33 1/3% support tests - 2010. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box an	id stop here. The	e organization qual	ifies as a publicly	supported organiz	zation .	▶□
b 33 1/3% support tests - 2009. If the	organization did r	not check a box or	ine 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
line 18 is not more than 33 1/3%, chec	ck this box and s	top here. The orga	anization qualifies	as a publicly supp	oorted organization	▶□
20 Private foundation If the organization						▶ □

SCHEDULE D

Department of the Treasury Internal Revenue Service

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 **Open to Public** Inspection

Name of the organization

THE WATER PROJECT, INC.

Employer identification number

26-1455510 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 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 revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		<u>ER PROJECT</u>				<u>26-1</u>	<u> 1455510</u>) Page 2		
Par	t III Organizations Maintaining C	collections of A	rt, Historical	Treasures, c	or Other	Similar As	sets (contil	nued)		
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of t	he following tha	t are a sign	ficant use of	rts collection	items		
	(check all that apply):									
а	Public exhibition	d	Loan or e	xchange progra	ams					
b	Scholarly research	е	Other			·				
C	Preservation for future generations									
4	Provide a description of the organization's co	·	•	_	-		Part XIV.			
5	During the year, did the organization solicit of				er sımılar as	sets				
	to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Pa	 								
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribut	ions or other as	sets not inc	luded				
	on Form 990, Part X?	•	•				Yes	L No		
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	illowing table:							
							Amount			
C	Beginning balance				•	1c				
d	Additions during the year	-	•			1d				
е	Distributions during the year		-			1e				
f	Ending balance					1f				
	Did the organization include an amount on F		21?				Yes	∟ No		
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete	if the organization an								
		(a) Current year	(b) Prior year	(c) Two year	rs back (d)	Three years ba	ick (e) Four	years back		
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses			-						
d	Grants or scholarships			<u> </u>				 		
е	Other expenditures for facilities				İ					
	and programs				<u> </u>					
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	ar end balance held a	as:							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
		%								
За	Are there endowment funds not in the posse	ession of the organiz	ation that are hel	d and administe	ered for the	organization	Г			
	by.							Yes No		
	(i) unrelated organizations						3a(i)			
	(ii) related organizations			ē			3a(ii)			
b	If "Yes" to 3a(ii), are the related organization:					•	3 b			
4	Describe in Part XIV the intended uses of the									
Pal	rt VI Land, Buildings, and Equipm					· · · · · · · · · · · · · · · · · · ·				
	Description of investment	(a) Cost or o basis (investr	' '	ost or other sis (other)	\ · ·	imulated ciation	(d) Book	value		
1a	Land .									
b	Buildings									
С	Leasehold improvements									
d	Equipment			4,300.			4	<u>4,300.</u>		
е	Other									
<u>Tota</u>	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, ∞lumn (B), lin	e 10(c).)		•	4	1,300.		

INC

Schedule D (Form 990) 2010

THE WATER PROJECT,

26-1455510 Page **3**

		PROJECT, IN		. d:4 - d F:	in an aint Of		455510 Page 4
Par	rt XI Reconciliation of Change in Net		m 990 to Au	laitea F		atement	
1	Total revenue (Form 990, Part VIII, column (A), lin				1		1,029,469.
2	Total expenses (Form 990, Part IX, column (A), lin				2		1,001,691.
3	Excess or (deficit) for the year. Subtract line 2 fro	m line 1			. 3		<u>27,778.</u>
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		
8	Other (Describe in Part XIV.)	••			_8		
9	Total adjustments (net). Add lines 4 through 8		-		9		0.
10	Excess or (deficit) for the year per audited financi			MACAL D	10	n Daham	27,778.
Par	rt XII Reconciliation of Revenue per I			WITH H	evenue pe		
1	Total revenue, gains, and other support per audit				•	1	1,032,966.
2	Amounts included on line 1 but not on Form 990	, Part VIII, line 12:	1	ı			
а		•		2a			
b	Donated services and use of facilities		1	2b			
С	, , ,			2c		I	
d	Other (Describe in Part XIV.)		ــا	2d	3,49	7.	
е	Add lines 2a through 2d					2e	<u>3,497.</u>
3	Subtract line 2e from line 1					. 3	1,029,469.
4	Amounts included on Form 990, Part VIII, line 12	, but not on line 1					
а	 Investment expenses not included on Form 990, 	Part VIII, line 7b	<u>L</u>	4a			
þ	Other (Describe in Part XIV.)		<u>L</u> .	4b			
С	Add lines 4a and 4b					4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equ					5	1,029,469.
Pa	art XIII Reconciliation of Expenses per	Audited Financia	I Statement	ts With	Expenses	per Retu	
1	Total expenses and losses per audited financial s	statements				1	1,005,188.
2	Amounts included on line 1 but not on Form 990	, Part IX, line 25:	•				
а	Donated services and use of facilities .			2a			
b	Pnor year adjustments	•••		2b			
С	Other losses .			2c_			
d	d Other (Describe in Part XIV.)	• •		2d	3,49	7.	
е	e Add lines 2a through 2d		••		•	2e	3,497.
3	Subtract line 2e from line 1					. 3	1,001,691.
4	Amounts included on Form 990, Part IX, line 25,	but not on line 1.					
а	a Investment expenses not included on Form 990,	Part VIII, line 7b		4a			3
b	Other (Describe in Part XIV.)			4b			
С	Add lines 4a and 4b					. 4c	0.
5	Total expenses Add lines 3 and 4c. (This must e	qual Form 990, Part I, I	ne 18.)			5_	1,001,691.
	art XIV Supplemental Information						
Com	mplete this part to provide the descriptions required	I for Part II, lines 3, 5, a	nd 9; Part III, Iir	nes 1a and	4; Part IV, lin	es 1b and 2	2b; Part V, line 4; Part
X, lın	ne 2, Part XI, line 8; Part XII, lines 2d and 4b; and P	art XIII, lines 2d and 4b	. Also complete	this part	to provide an	y additional	information.
PA(GE 4, PART XII, LINE 2D -	THE ADJUST	MENT REL	ATES	TO COST	OF GO	OODS SOLD
							
TH	AT WAS NETTED AGAINST THE	REVENUE SHO	OWN ON T	HE FO	RM 990.	HOW	EVER, IT
				_			
WA:	AS L <u>ISTED AS A SEPARATE EX</u>	PENSE ON THE	E AUDITE	D FIN	ANCIAL	STATE	MENTS.
PA	GE 4, PART XIII, LINE 2D	- THE ADJUST	MENT RE	LATES	TO COS	T OF	GOODS SOLD
TH	IAT WAS NETTED AGAINST THE	REVENUE SHO	T NO NWC	HE FO	RM 990.	HOW	EVER, IT
WA	AS LISTED AS A SEPARATE EX	PENSE ON THI	E AUDITE	D FIN	ANCIAL	STATE	MENTS.

SCHEDULE F (Form 990)

Department of the Treasury

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.

2010
Open to Public Inspection

Name of the organization

Employer identification number

THE WATER PROJE	CT. TNC.			26-145551	0
		ctivities Out	tside the United States. Compl		
to Form 990, Par					
		maintain record	ds to substantiate the amount of the g	rants or assistance, the	
_			selection criteria used to award the gra		Yes 🔲 No
J ,	J		•		
2 For grantmakers. Desc	nbe in Part V the	organization's	procedures for monitoring the use of g	rant funds outside the United State	es.
3 Activities per Region. (Ti	ne following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)	
(a) Region					(f) Total
	offices	employees, agents, and	(by type) (e.g., fundraising, program	is a program service,	expenditures for and
	in the region	independent	services, investments, grants to	describe specific type	investments
		contractors in region	recipients located in the region)	of service(s) in region	in region
				WELLS ARE RESTORED AND	
				REPAIRED THROUGHOUT THE	
				REGION, LATRINES ARE	
SIERRA LEONE	l 0	0	PROGRAM SERVICES	CONSTRUCTED, AND THE	369,919.
				WELLS ARE RESTORED AND	
			ļ	REPAIRED THROUGHOUT THE	
				REGION, LATRINES ARE	
KENYA	l 0		PROGRAM SERVICES	CONSTRUCTED, AND THE	228,250.
				WELLS ARE RESTORED AND	
				REPAIRED THROUGHOUT THE	
		1	<u> </u>	REGION, LATRINES ARE	
UGANDA	0		PROGRAM SERVICES	CONSTRUCTED AND THE	73,124.
00.212.5				WELLS ARE RESTORED AND	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				REPAIRED THROUGHOUT THE	
				REGION AS A RESPONSE TO	!
HAITI	ا .		PROGRAM SERVICES	THE CRISIS FOLLOWING THE	74,000.
				WELLS ARE RESTORED AND	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				REPAIRED THROUGHOUT THE	
	1			REGION, LATRINES ARE	
SUDAN	1		PROGRAM SERVICES	CONSTRUCTED AND THE	52,500.
<u> </u>	`		THOUSANT DERIVIOUS	WATER WELLS ARE	32,300.
	Ì			INSTALLED IN RURAL	
				COMMUNITIES IN THE	
INDIA	1 .	0	PROGRAM SERVICES	TRICHY REGION.	27.950.
INDIA	· · · · · ·		PROGRAM SERVICES	TRICHI REGION.	27,930.
	ļ				
		1			
					}
			-	 	
)	
3 a Sub-total		0			925 742
b Total from continuation	} <u>'</u>	\			825,743,
sheets to Part I	(
c Totals (add lines 3a		,	 		0.
and 3b)	,				825 743

26-1455510

Page 2

THE WATER PROJECT, INC.

Schedule F (Form 990) 2010

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 duplicated if additional space is needed

(a) Name of organization and EIN (if applicable) (c) Region (d) Purpose of grant	TO INSTALL AND REPAIR WATER WELLS AS WELL AS CARRY OUT HYGIENE KAKAMEGA, KENYA TRAINING IN RURAL				_
pose of (e) Amount of cash grant	AND REPAIR AS WELL T HYGIENE RURAL 209,600,				
(f) Manner of cash disbursement	O, WIRE TRANSFER				
(g) Amount of non-cash or assistance a	o				,
(h) Description of non-cash assistance					
(i) Method of valuation (book, FMV, appraisal, other)	CASH				

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2010

3 Enter total number of other organizations or entities

Page 3

26-1455510

THE WATER PROJECT, INC.

Schedule F (Form 990) 2010

Part III 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

(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance	•				
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of (d) Amount of recipients cash grant					
(b) Region					
(a) Type of grant or assistance					

Schedule F (Form 990) 2010

	ile F (Form 990) 2010 THE WATER PROJECT, INC.	<u> 26-1455510</u>	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	X No
	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	X No
	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	X 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	X No
	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	X No
	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	X No

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.

SCHEDULE F, PART I, LINE 2: THE WATER PROJECT, INC. WORKS DIRECTLY WITH

ITS PROJECT IMPLEMENTERS TO MEASURE AND EVALUATE THE EFFECTIVENESS OF

PREVIOUSLY FUNDED AND INSTALLED WATER PROJECTS. THROUGH THIS PROCESS,

THE WATER PROJECT, INC. THEN, IN COLLABORATION WITH THOSE PARTNERS,

REFINES PROGRAM APPROACHES SO THEY MEET OR EXCEED ESTABLISHED BEST

PRACTICES AS WELL AS ITS OWN CRITERIA FOR LONG TERM PROGRAM

EFFECTIVENESS. THIS PROCESS MAY INCLUDE SITE VISITS, EXTERNAL AND

INDEPENDENT AUDITS OF PARTNER ACTIVITIES, REGULAR MEETINGS WITH VARIOUS

STAKEHOLDERS, AND RESEARCH.

PART I, LINE 3, COLUMN (E):

REGION: SIERRA LEONE

(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.

REGION: KENYA

(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.

REGION: UGANDA

(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.

REGION: HAITI

Schedule F (Form 990) 2010 THE WATER PROJECT, INC. 26-1455510 Page 5
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.
(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION AS A RESPONSE TO THE CRISIS FOLLOWING THE
EARTHQUAKE IN HAITI.
EARTHQUARE IN HAIII.
REGION: SUDAN
/P) CDECTETC MUDEC OF CEDUTCEC IN DECTON, MELIC ADE DECMODED AND
(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.
PART II, COLUMN (D):
REGION: KAKAMEGA, KENYA
(D) PURPOSE OF GRANT: TO INSTALL AND REPAIR WATER WELLS AS WELL AS CARRY
OUT HYGIENE TRAINING IN RURAL COMMUNITIES AND SCHOOLS
DOT HIGIERE TRAINING IN KORAL COMMONITIES AND SCHOOLS

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

2010
Open to Public Inspection

Name of the organization

THE WATER PROJECT, INC.

Employer identification number 26-1455510

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
NEEDLESSLY FROM A LACK OF ACCESS TO CLEAN WATER AND PROPER SANITATION.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
THROUGH A PARTNERSHIP WITH BUSOGA TRUST AMERICA, THE WATER PROJECT,
INC. IS INSTALLING WATER WELLS IN RURAL COMMUNITIES AND AT SCHOOLS IN
THE MASINDI REGION OF UGANDA. IN ADDITION TO THE INSTALLATION OF
HARDWARE, THE TEAMS CARRY OUT HYGIENE TRAINING WITHIN THE SCHOOLS AND
COMMUNITIES THROUGH UNIQUE DRAMA PRESENTATIONS AND FORMAL TRAINING
SESSIONS. THE WATER PROJECT, INC. FUNDED 12 WELL PROJECTS IN 2010.
IN ADDITION, THE WATER PROJECT, INC. PURCHASED AND DELIVERED 15 BIOSAND
FILTERS FOR A WATER FILTRATION PILOT PROJECT.
EXPENSES \$ 73,124. INCLUDING GRANTS OF \$ 73,124. REVENUE \$ 0.
THROUGH A PARTNERSHIP WITH WATER HARVEST INTERNATIONAL, THE WATER
PROJECT, INC. IS INSTALLING WATER WELLS IN RURAL COMMUNITIES, CHURCHES,
AND SCHOOLS IN SOUTHERN SUDAN. IN ADDITION TO THE INSTALLATION OF
HARDWARE, THE TEAMS CARRY OUT BASIC HYGIENE TRAINING WITHIN THE SCHOOLS
AND COMMUNITIES. THE WATER PROJECT, INC. FUNDED 24 PROJECTS IN 2010.
EXPENSES \$ 52,500. INCLUDING GRANTS OF \$ 52,500. REVENUE \$ 0.
THROUGH A PARTERSHIP WITH WELLS FOR LIFE, THE WATER PROJECT, INC. IS
INSTALLING WATER WELLS IN RURAL COMMUNITIES IN THE TRICHY AREA OF
INDIA. THE WATER PROJECT, INC. FUNDED 15 PROJECTS IN 2010.
EXPENSES \$ 27,950. INCLUDING GRANTS OF \$ 27,950. REVENUE \$ 0.

Name of the organization **Employer identification number** THE WATER PROJECT, INC. 26-1455510 THE WATER PROJECT, INC. WORKS DIRECTLY WITH ITS PROJECT IMPLEMENTERS TO MEASURE AND EVALUATE THE EFFECTIVENESS OF PREVIOUSLY FUNDED AND INSTALLED WATER PROJECTS. THROUGH THIS PROCESS, THE WATER PROJECT, INC. THEN, IN COLLABORATION WITH THOSE PARTNERS, REFINES PROGRAM APPROACHES SO THEY MEET OR EXCEED ESTABLISHED BEST PRACTICES AS WELL AS ITS OWN CRITERIA FOR LONG TERM PERSONAL EFFECTIVENESS. THIS PROCESS MAY INCLUDE SITE VISITS, EXTERNAL AND INDEPENDENT AUDITS OF PARTNER ACTIVITIES, REGULAR MEETINGS WITH VARIOUS STAKEHOLDERS, AND RESEARCH. EXPENSES \$ 69,774. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. THE WATER PROJECT, INC. REGULARLY DEVELOPS EDUCATIONAL MATERIALS, ARTICLES, AND CURRICULA TO EDUCATE STUDENTS ACROSS ITS CONSTITUENCY ABOUT THE WATER CRISIS, ITS EFFECTS, AND WAYS IN WHICH THEY CAN HELP. THE WATER PROJECT, INC.'S WEBSITE PROVIDES A RICH SOURCE OR MATERIAL AND LINKS FOR TEACHERS AS WELL. THIS ONLINE PLATFORM WAS LAUNCHED IN 2010. EXPENSES \$ 5,800. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11: BEFORE FILING THE FORM 990, ALL OF THE BOARD MEMBERS REVIEWED THE TAX RETURN BY TELECONFERENCE. FORM 990, PART VI, SECTION B, LINE 12C: THE WATER PROJECT, INC. REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY THROUGH MEETINGS AND WRITTEN DISCLOSURE STATEMENTS. FORM 990, PART VI, SECTION B, LINE 15A: THE PROCESS FOR DETERMINING COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS BASED UPON SALARY SURVEYS AND OTHER RESEARCH MATERIALS. THE PROCESS AND DELIBERATION ARE Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990 EZ) (2010)	Page 2
Name of the organization THE WATER PROJECT, INC.	Employer identification number 26-1455510
NOTED IN THE BOARD MINUTES.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL,AK,AZ,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,MD,MA,MI,MS,NJ,	NM, NY, NC, OK, OR, PA
RI,SC,TN,UT,VA,WA,WV	
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCU	MENTS, CONFLICT
OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE ALL MADE	E AVAILABLE TO THE
PUBLIC AT THE WATER PROJECT, INC OFFICES OR BY REQUEST.	