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SCANNED SEP 1 1 2012

## **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

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2011 calendar year, or tax year beginning 2011, and ending 20 C Name of organization Wine to Water D Employer identification number Check if applicable Doing Business As 20-8877288 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change 828-355-9655 Initial return City or town, state or country, and ZIP + 4 Terminated **Boone, NC 28607** Amended return G Gross receipts \$ F Name and address of principal officer **Dickson B Hendley** Application pending H(a) Is this a group return for affiliates? Yes Vo No P O Box 2567, Boone, NC 28607 H(b) Are all affiliates included? Yes No If "No." attach a list (see instructions) **✓** 501(c)(3) ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status 501(c) ( www.winetowater.org Website: ▶ H(c) Group exemption number ▶ Form of organization 🗸 Corporation 🗌 Trust NC. 2007 M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: to provide clean water and sanitation; to edcuate and raise awareness about the global water crisis Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 6 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 6 6 Total number of volunteers (estimate if necessary) . . . 100 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h) 545,580 8 420,167 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3; 11 Other revenue (Part VIII, column (A), lines 5, 62 80; 5,721 Total revenue - add lines 8 through 11 (must equal Part VIII, coldina (A), (I) 12 545.580 425,888 Grants and similar amounts paid (Part IX, column (At, libes 1-3) 13 288,246 247,148 Benefits paid to or for members (Part IX, column (A), line 4). 14 Salaries, other compensation, employee benefits (Part-IX, contains (A 15 124,519 181,751 Professional fundraising fees (Part IX, column (A), (The) He 16a Total fundraising expenses (Part IX, column\(D)\_line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 104.565 101.739 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 517,330 530,638 19 Revenue less expenses. Subtract line 18 from line 12 28,250 -104,750 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 204,289 100,205 21 Total liabilities (Part X, line 26) . 2.584 3,250 22 Net assets or fund balances. Subtract line 21 from line 20 210,705 96,955 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge ignature of office Sign Here Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check \_\_\_\_ if **Paid** self-employed Preparer Firm's name ▶ Firm's FIN ▶ **Use Only** Firm's address ▶ Phone no

Form **990** (2011)

🗌 Yes 🗌 No

May the IRS discuss this return with the preparer shown above? (see instructions)

om 99	0 (2011) Page 2
Part	<u> </u>
	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
	Provide Clear Water and Samilation, educate and raise awareness about the grobal water Crisis
	······································
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount organis and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	grants and anocations to others, the total expenses, and revenue, if any, for each program service reported.
40	(Code: ) (Expenses \$ 85,000 including grants of \$ 85,000 ) (Revenue \$ )
4a	(Code: ) (Expenses \$ 85,000 including grants of \$ 85,000 ) (Revenue \$ )  Ethiopia Deep Well Project - Wine to Water has partnered with Water is Life, International to provide clean water to rural communities
	in Ethiopia since 2007. The program consists of drilling deep wells and establishing local water committees to manage and maintain
	the well. In many areas of Ethiopia, the water table (aquifer) is low, the soil is very arid, and hard formation (such as rock) exists.
	These conditions make well drilling much more complex and expensive, requiring special heavy-duty drill rigs. In 2011, Wine to
	Water purchased a PAT-301 drill rig (\$25,000) to add to Water is Life, International's fleet of well drilling equipment. The PAT-301 is
	compact and portable hydraulic drilling rig for both DTH (down-the-hole) hammer and rotary drilling. This means it can drill through
	hard rock formations up to 100 meters (328 feet) in depth. The PAT-301 was used to drill several wells in 2011 and is still in full
	operation. In response to the devastating 2011 Horn of Africa Drought, Wine to Water cost-share funded (\$60,000) 8 deep wells,
	with Tear Fund, in the Borena Zone of southern Ethiopia. This included labor, materials, and all costs associated with completing
	each well. The final well was completed in early 2012 and the 8 deep wells in Borena are currently providing clean water for 4,420.
	Ethiopians.
4b	(Code: ) (Expenses \$ 69,945 including grants of \$ 57,255 ) (Revenue \$ )
	Uganda Bio-Sand Filters and Training Center Project - In 2008, Wine to Water partnered with Samaritan's Purse UK to build 2
	community water/sanitation centers through a local Ugandan NGO called Connect Africa; one in Kigumba and the other in Attiak.
	The two centers train locals to manufacture bio-sand water filters made of concrete, gravel, and media sand for the 38% of the
	country's population does not have access to clean water. Wine to Water funded 452 bio-sand filters (\$45,200) in 2011, providing
	clean water to 5,458 Ugandans. A widows/orphans home (\$7,560.91) was also built in Kigumba, to serve a revolving door to equip
	widows and their children make/save money to get back on their feet. The home has been occupied by 1 widow and her 3 children
	since the home was completed in August of 2011. The remaining \$17,183.66 was spent on material/filter transportation costs and
	construction improvements to the community centers.
	,
	/Only \/\(\Gamma\) /\(\Gamma\) 47.205 including exerts of \(\Gamma\)
4c	(Code ) (Expenses \$ 47,385 including grants of \$ 44,565 ) (Revenue \$ )
	Cambodia Shallow Well, Ceramic Filter, and Latrine project - Since 2008, Wine to Water has been partners with a local community based organization in Phnom Penh, Cambodia called Kone Kmeng. Wine to Water completely funds their Relief and Development
	Assistance program that provides clean water and sanitation for the 60% of the Cambodian population that lives without. There are
	4 aspects to Kone Kmeng's RDA program: drilling shallow wells, building latrines, providing ceramic water filters, and community
	training on sanitation and hygiene. In 2011, 122 wells were drilled giving 1,234 people access to clean water, including 3 wells for 53
	people in Vietnam. In addition, 120 latrines were built for 959 beneficiaries GPS locations, pictures, and data are taken for each
	well and latrine. When the aquifer tapped into via the shallow wells tests high in arsenic, ceramic water filters are issued to the well
	to combat this; which totaled 1,334 filters for 7,505 Cambodians in 2011. 300 of these filters were distributed for emergency relief
	for flood victims. Community training on hygiene and sanitation is done before all well, latrine, and filter installs. Finally, Wine to
	Water leases one hour, every Wednesday, for Kone Kmeng's radio broadcasting on water and sanitation. The radio program
	has an estimated 200 listeners, with 98 calls and 182 missed calls in 2011.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 135,385 including grants of \$ 60,306 ) (Revenue \$ )
4e	Total program service expenses ► 337,735

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Part	V Checklist of Required Schedules			
	In the executation decombed in continue 501(a)(b) on 4047(a)(4) (ather) there is no interference of 600 at 100 at		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	✓	
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		<b>,</b>	
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
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		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		- <b>/</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "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			1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		✓
а	VII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
b	complete Schedule D, Part VI	11a	<b>√</b>	
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<b>✓</b>
d	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		✓
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? 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	:	1
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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	<b>√</b>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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		<b>√</b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		./
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	<u> </u>	†

Form 99	0 (2011)		f	Page <b>4</b>
Part	V Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	No
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		1
	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		
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>✓</b>
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		
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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).			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	<del></del>	<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>	29 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
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
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 and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	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	

Part	<u> </u>			uge •
газі	Check if Schedule O contains a response to any question in this Part V			
	Check is concodic a contains a response to any question in that are vivil in the vi	• •	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			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		✓
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)?	<u>4a</u>		<b>V</b>
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?	<u>5a</u> 5b		<b>V</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			<b>-</b>
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_5c_		
oa	organization solicit any contributions that were not tax deductible?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ou		<b>                                     </b>
	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		<b>✓</b>
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?	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?	7е		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<b>/</b>
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		_
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.	0		
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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		ŀ	
40	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ.—_	ļ. <u>-</u>
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del>	1
а	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	138	-	<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			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and		"No
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response to any question in this Part VI			
Secti	on A. Governing Body and Management			
			Yes	No
1a	<u> </u>	-		1
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 6	ļ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1	ļ	
	any other officer, director, trustee, or key employee?	2	1	
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	<u> </u>	1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5.	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6 7a	Did the organization have members or stockholders?	6		1
1 a	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1a		<del>  •</del>
_	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1		<del> </del>
	the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	l _		١,
Coot	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<b>√</b>
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1.54		<b>                                     </b>
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<u> </u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	40-		Ì
12	Did the organization have a written whistleblower policy?	12c		<del> </del>
13 14	Did the organization have a written whistieblower policy?	13		1
15	Did the process for determining compensation of the following persons include a review and approval by	'-		<b>                                     </b>
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	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 toyoble optituding the year?	<u> </u>	<b></b> -	ļ.,
L	with a taxable entity during the year?	16a		<b>  ✓</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		<del> </del> -
Secti	ion C. Disclosure	1 .00		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶ North Carolina			-
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	(c)(3)s	only
	available for public inspection. Indicate how you made these available. Check all that apply			
	✓ Own website ☐ Another's website ☐ Upon request	_		
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	of inte	rest p	oolicy
20	and financial statements available to the public during the tax year.	ملا علا	_	
20	State the name, physical address, and telephone number of the person who possesses the books and records	oi the	=	

_			
Form	990	(2011)	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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	<u>a</u> nız	atıo	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee
	(C)									
(A)	(B)	(do n	ot ch		ition	than o	one	(D)	(E)	(F)
Name and Title	Average hours per	ge box, unless pers		box, unless person is both an					Reportable compensation from	Estimated amount of
	week			<del></del>				from	related	other
	(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	nplo	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related organizations	ctor	tiona	٦,	夏	st co	"	(W-2/1099-MISC)		organization and related
	in Schedule	trust	True l		yee	mpe				organizations
	0)	8	stee			Highest compensated employee				
(1) Carl Clawson, Chairman of Board	_	,								
140 Woods Lane, Banner Elk, NC 28604	3	<b>-</b>			<u> </u>		_	0	0	0
(2) Terrie Blevins, Treasurer 489 Trivette Branch Road, Boone, NC 28607	3	1						0		
(3) Dickson B Hendley, President & Founder		<b></b>	$\vdash$				_	0	0	0
234 Harrison Lane, Boone, NC 28607	40	<b> </b> ✓		1	1			17,500	o	0
(4) Jeff Hendley		<u> </u>		Ť	Ť	-		17,000		
236 Harrison Lane, Boone, NC 28607	1	✓						О	o	0
(5) Leonard C Blevins										
489 Trivette Branch Road, Boone, NC 28607	1	✓						0	0	0
(6) Jerry Butler										
479 County Road 2651, Rio Medina TX 78066	1	<b>/</b>			<u> </u>		<u> </u>	0	0	0
(7) Allen Peterson		,								
4125 Highway 197 South, Burnsville, NC 28607 (8) Annie C Marion	1	<b>✓</b>	<b>-</b>					0	0	0
537 Oak Street, Boone, NC 28607	40			1		1		35,625	o	0
(9)				·	$\vdash$	•		00,023		•
	1									
(10)					ļ					
									_	
(11)	1									
(12)	-									
(13)							<del> </del>			
(14)	-					_	-			<u> </u>

Part	VII Section A. Officers, Directors, Trust	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average hours per week	do not check more than one box, unless person is both an officer and a director/trustee)  Reportable compensation from				Reportable Reporta compensation		·m	Estin	F) nated unt of her			
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	(i)	compe from organ and r	nsation the ization elated zations	
(15)														
(16)		-			_									
_(17)_				_	_	_								
(18)														
(19)														
(20)													•	<del></del>
(21)		-												
(22)														
(23)											-			
(24)														
(25)														
1b c	Sub-total	VII, Sectio	n A			 	•	<b>&gt;</b>	53,125					
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (including but				: e list		above	<b>►</b> e) w	53,125 ho received m		000 o	f		
	reportable compensation from the organi	zation ► 0	·										Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete s								oloyee, or high	•		3		<b>✓</b>
4	For any individual listed on line 1a, is the organization and related organizations													
-	individual	·										4		1
5	for services rendered to the organization									zation or indivi		5		✓
	on B. Independent Contractors													
	Complete this table for your five highest compensation from the organization. Repyear.												n's ta	х
	(A) Name and business add	Iress							(B) Description of s	services	Co	(C) ompens	ation	
None														
	<del></del>	, . :												
2	Total number of independent contractor							th th	nose listed ab	ove) who				

Pari	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
nts nts	1a	Federated campaigns	1a	Ĭ			
ira our	b	Membership dues	1b	1			
ğ,	C	Fundraising events	1c	7			
ar /	d	Related organizations	1d	1			
S, C	e	Government grants (contributions)		1			
is is	f	All other contributions, gifts, grants,		1			
the bet		and similar amounts not included abov		7			
Öğ	g	Noncash contributions included in lines 1		┥			
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		420,167			
_ e			Business Code				
Ven	2a						
æ	,b						
<u>i</u> ë	С						<del>-</del>
ě	d						
Ē	е						
Program Service Revenue	f	All other program service rever				•	
Ā	g	Total. Add lines 2a-2f	<del> •</del>	0		-	
	3	Investment income (including	dıvıdends, ınterest,				
		and other similar amounts)					
	4	Income from investment of tax-ex	empt bond proceeds ►				
	5	Royalties	<u> </u>		_		
		(ı) Re	eal (II) Personal	_]			
	6a	Gross rents		_]			
	b	Less rental expenses		_]			
	С	Rental income or (loss)					
	d	Net rental income or (loss) .	<u> </u>				
	7a	Gross amount from sales of (i) Secu	rities (ii) Other				
		assets other than inventory					
	b	Less cost or other basis					}
		and sales expenses .		_			
	C	Gain or (loss)					
	d	Net gain or (loss)	· · <u>· · · · •</u>	_			
ō	0-	Construction from the discount	_				
venue	8a	Gross income from fundraising events (not including \$					
ě		of contributions reported on line	10)				
Other Re		See Part IV, line 18					
the	h	Less: direct expenses	-	-{			
Ò		Net income or (loss) from fund					
		Gross income from gaming acti		+			
	Ju	See Part IV, line 19					
	b	Less: direct expenses		4			
	C	Net income or (loss) from gami		<del></del>			
		Gross sales of inventory,		+			
	'*-		· a 34,193				
	b	Less: cost of goods sold		-1			:
	c	Net income or (loss) from sales		5,721	5,721		
	<u> </u>	Miscellaneous Revenue	Business Code	1			
	11a			1			
	b						
	С				-		
	d	All other revenue					
	е	Total. Add lines 11a-11d					
	12	Total revenue. See instruction	ns	425,888	5,721		

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX								
	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21							
2	Grants and other assistance to individuals in the United States. See Part IV, line 22 .							
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	247,148	247,148					
4 5	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees	17,500	8,225		9,275			
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 accruals and contributions (include section 401(k) and 403(b) employer contributions)	129,293	33,949	55,396	39,948			
9	Other employee benefits	23,738	7,026	5,007	11,705			
10	Payroll taxes	11,220	3,216	4,238	3,766			
11	Fees for services (non-employees):							
а	Management							
b	Legal							
С	Accounting							
d	Lobbying							
е	Professional fundraising services See Part IV, line 17							
f	Investment management fees							
g	Other	4,290	1,046	2,830	414			
12	Advertising and promotion	29			29			
13	Office expenses	20,490	1,073	12,080	7,337			
14	Information technology	1,391	_		1,391			
15	Royalties							
16	Occupancy	18,632	5,286	5,427	7,919			
17	Travel	23,311	14,459	652	8,200			
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 .	4,873	0	4,873	0			
23	Insurance	599	0	599	0			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)							
а	Vehicle expenses	3,220	374	388	2,458			
b	Telecommunications	10,482	4,356	1,502	4,624			
C	Education & Awareness	1,121	0	98	1,023			
d	Project supplies & materials	11,575	11,575	0	0			
е	All other expenses Administrative	1,726	0	1,694	32			
25	Total functional expenses. Add lines 1 through 24e	530,638	337,733	94,784	98,121			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)							

Р	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	189,065	1	83,762
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	<del></del>
	4	Accounts receivable, net	0	4	772
	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		Ĩ	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		.	
sts		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	511	7	509
₹.	8 .	Inventories for sale or use	3,023	8	2,035
	9	Prepaid expenses and deferred charges	62	9	0
	10a	Land, buildings, and equipment. cost or			
		other basis Complete Part VI of Schedule D 27,620			
	b	Less. accumulated depreciation 10b 14,513	11,628		13,127
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	<del></del>	14	
	15	Other assets. See Part IV, line 11	204,289	15 16	100,205
_	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	204,269	17	100,203
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	<del>, . ,</del>
'n	22	Payables to current and former officers, directors, trustees, key		~ 1	-
Liabilities	22	employees, highest compensated employees, and disqualified persons.			
Ē		Complete Part II of Schedule L	<del></del>	22	
Lia	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 (including federal income tax, payables to related third	-		
		parties, and other liabilities not included on lines 17-24). Complete Part X	2,584		3,250
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	2,584	26	3,250
		Organizations that follow SFAS 117, check here ▶ ☑ and complete			
ĕ		lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets	141,899		65,038
Ba	28	Temporarily restricted net assets	59,806	28	31,917
g	29	Permanently restricted net assets	*.	29	
Ξ		Organizations that do not follow SFAS 117, check here ► □ and		] [	
Net Assets or Fund Balances	1	complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ϋ́	32	Retained earnings, endowment, accumulated income, or other funds .	***	32	
ž	33	Total net assets or fund balances	201,705	<del></del>	96,955
	34	Total liabilities and net assets/fund balances	204,289	34	100,205

Form 9	990 (20,11)			Pa	age <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		42	5,888
2	Total expenses (must equal Part IX, column (A), line 25)	2		53	0,638
3	Revenue less expenses. Subtract line 2 from line 1	3		(104	1,750)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		20	1,705
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		9	6,955
1	Table Tinancial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			Yes	No No
	Schedule O.		_		
2a			2a	<u> </u>	<b>✓</b>
b	····· - ··· - ··· - ··· - ···· - ···· - ···· - ··· - ··· - ·		2b		✓
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 account		2c		
	If the organization changed either its oversight process or selection process during the tax year, exschedule O.	plain in			
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-1332	forth in	20		

**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** (2011)

#### 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.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Wine to Water 20-8877288 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The 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 described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part 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 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II **c** Type III–Functionally integrated **d** Type III-Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? . . . . . 11g(ı) (ii) A family member of a person described in (i) above? . 11g(iı) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported (iv) is the organization (v) Did you notify (ii) FIN (vi) Is the (vii) Amount of in col (i) listed in your organization (described on lines 1-9 the organization in organization in col support col (i) of your governing document? above or IRC section (i) organized in the (see instructions)) Yes Yes Nο Yes (A) (B) (C) (D) (E)

Total

Schedul	e A (F,orm 990 or 990-EZ) 2011							Page <b>2</b>
Pạrt	Support Schedule for Organiza (Complete only if you checked th Part III. If the organization fails to	e box on line	5, 7, or 8 of I	Part I or if the	organization	faile	ed to qua	
Secti	on A. Public Support							
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e)	2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	140,553	173,511	309,406	545,580		420,167	1,589,217
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							
-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)							
6	Public support. Subtract line 5 from line 4.							1,589,217
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e)	2011	(f) Total
7	Amounts from line 4	140,553	173,511	309,406	545,580		420,167	1,589,217
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	37	122	0		0	159
9	Net income from unrelated business activities, whether or not the business is regularly carried on				Ŭ			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10							1,589,376
12	Gross receipts from related activities, etc.	(see instruction	ns)			12		34,193
13	First five years. If the Form 990 is for the organization, check this box and stop her	re		d, third, fourth,	_			
	on C. Computation of Public Suppor		•	1 luman (6)		44		0/
14 15	Public support percentage for 2011 (line 6 Public support percentage from 2010 Sch		•			14 15		<u>%</u>
15 16a	331/3% support test—2011. If the organization qual	zation did not o	check the box	on line 13, and	l line 14 is 331	з% о		eck this
b	331/3% support test—2010. If the organicheck this box and stop here. The organi	zation qualifies	s as a publicly	supported orga	anızatıon .			. ▶ □
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization mee Part IV how the organization meets the "forganization"	ets the "facts-a	and-circumstar	nces" test, che	ck this box an	d sto	p here. E	xplaın ın

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization fails to qualify	under the te	sts listed bei	ow, piease co	omplete Part	II.)	
	on A. Public Support	_		r -	-		
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees		İ				
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid						
	to or expended on its behalf						
5_	The value of services or facilities		<del>-</del>				
. • -	furnished by a governmental unit to the				_		_
	organization without charge			İ			
6							
6 72	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3			<b> </b>			<del></del>
r a	received from disqualified persons .						
_	·					<del>-</del>	<del> </del>
þ	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
C+:	line 6)					<u> </u>	
	on B. Total Support	(-) 0007	(h) 0000	(-) 0000	(-1) 0010	(-) 0011	(6 Takal
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(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		İ				
	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						]
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	<u> </u>	<u> </u>	<u> </u>		L	<u> </u>
14	First five years. If the Form 990 is for the	_			-		
O = -4:	organization, check this box and stop he			· · · · ·			· · · <u>P</u> <u></u>
	on C. Computation of Public Suppor			10 1 (0)			
15	Public support percentage for 2011 (line 8		•				%
16 Socti	Public support percentage from 2010 School D. Computation of Investment In			<u></u>	<del>::::::</del>	16	%
				vilno 12 och	mn (f)\	147	
17 18	Investment income percentage for 2011 ( Investment income percentage from 2010)						% %
	33 <sup>1</sup> / <sub>3</sub> % support tests—2011. If the organ						
19a	17 is not more than 33½%, check this box						•
							_
b	331/3% support tests—2010. If the organize line 18 is not more than 331/3%, check this						
00	Private foundation. If the organization di						
20	Filvate louiluation. Il the organization di	a not check a	DOX OF THE 14	, 19a, OF 19D,	CHECK THIS DOX	and see instit	ICHORS 🚩 📋

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 (c) does not include unusual grant in amount of \$68,419

#### SCHEDULE D (Form 990)

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB № 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts Total number at end of year . . . . . 1 2 Aggregate contributions to (during year) . Aggregate grants from (during year) . . 3 4 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? . . . . . . . . . ☐ Yes ☐ No 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 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 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 a Total number of conservation easements . . 2a Total acreage restricted by conservation easements . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 8 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. 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. 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 . . . . . . . . . . . . . . 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: Revenues included in Form 990, Part VIII, line 1 . . . . . . . . . . . . . . . .

Assets included in Form 990, Part X .

Part	II Organizations Maintaining C	ollections of	Art, His	torical 1	reasures,	or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and of	ther reco	rds, ched	k any of the	e follov	ving that are a s	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchange	e prog	rams	
b	☐ Scholarly research							
С	☐ Preservation for future generations							
4	Provide a description of the organization	n's collections	and expla	ain how t	hey further t	the org	ganızation's exer	mpt purpose in Part
	XIV.							
5	During the year, did the organization so							
	assets to be sold to raise funds rather th							
Part					anization a	nswe	red "Yes" to Fe	orm 990, Part IV,
	line 9, or reported an amount of							
1a	Is the organization an agent, trustee, concluded on Form 990, Part X?							ot ☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part							
_	,,,						A	mount
c	Beginning balance	·			·	10	= = =	
d	Additions during the year					10	<del>-1</del>	
е	Distributions during the year					1e		
f						1f		
2a	Did the organization include an amount	on Form 990, P	art X, line	21? .		. —		☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part							
Par			zation ar	nswered				
		(a) Current year	<b>(b)</b> Pri	or year	(c) Two years	s back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships		ļ					
е	Other expenditures for facilities and							
	programs		ļ					
f	Administrative expenses							
g	End of year balance		L		<u> </u>			
2	Provide the estimated percentage of the			e (line 1g	, column (a)	) held	as·	
a	Board designated or quasi-endowment		%					
b	Permanent endowment ►  Temporarily restricted endowment ►	_%						
С		%	2007					
32	The percentages in lines 2a, 2b, and 2c are there endowment funds not in the p			zation th	at are held s	and ad	ministered for th	20
Ou .	organization by.	00330331011 01 11	ne organi	Zation tin	at are rield a	and ad	ministered for ti	Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(II), are the related organiza			n Sched	ule B?			3b
4	Describe in Part XIV the intended uses of							<del></del>
Part								
	Description of property	(a) Cost or o	ther basis	(b) Cost	or other basis other)	٠,,	Accumulated epreciation	(d) Book value
1a	Land							
b	Buildings							
С	Leasehold improvements							
d	Equipment				27,640		14,513	
е	Other							13,127
Total.	Add lines 1a through 1e. (Column (d) mus	st equal Form 9	90, Part .	X, columi	n (B), line 10	(c))	•	13,127

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 val Cost or end-of-year m	
(1) Financial	derivatives			
(2) Closely-ł	neld equity interests	- "		
(3) Other				
(A)				
(B)				
(C)				· · · · · · · · · · · · · · · · · · ·
(D)				
(E)				<del></del>
(F)				
(G) (H)				
(I)				
	(b) must equal Form 990, Part X, col. (B) line 12)			1
Part VIII	Investments—Program Relate	d See Form 990 Part X	line 13	
	(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)				<u> </u>
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
_(8)				
(9)				_
(10)	(h) moved accord Forms 000. Don't V and (D) (ma 10.)			
Part IX	(b) must equal Form 990, Part X, col (B) line 13) ► Other Assets. See Form 990, Part X	ort V Juno 15		
Partix		(a) Description		(b) Book value
(1)	<del>`</del>			(0)
(2)				<del></del>
(3)				
(4)				
(5)		-		
(6)				
(7)				
(8)				
(9)				
(10)	45 000 5 11	1.601		
	mn (b) must equal Form 990, Part X, o		<u> </u>	
Part X 1.	Other Liabilities. See Form 990  (a) Description of liability	(b) Book value	T	<del></del>
	Income taxes	(b) Book value	-	
(2)	moome taxes		1	
(3)			i	
(4)			i	
(5)		<del>                                     </del>	1	
(6)			1	
(7)			1	
(8)			]	
(9)			]	
(10)			J	
(11)				
	(b) must equal Form 990, Part X, col (B) line 25)		<u> </u>	

Schedul	e D (Form 990) 2011			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Au	udited Financial Stateme	ents	-
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	<u> </u>	9	
10	Excess or (deficit) for the year per audited financial statements. Combine	lines 3 and 9	10	
Part	XII Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Retu	'n
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		
b	Donated services and use of facilities	2b	1 1	
_ c	Recoveries of prior year grants	2c	1	
d	Other (Describe in Part XIV.)	2d	1	
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 VIII, line 12, but not on line 1:		Ì	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)		1	
С	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		5	
Part :	Reconciliation of Expenses per Audited Financial Statem	ents With Expenses pe	er Ret	urn
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		
ь	Prior year adjustments	2b	1	
С	Other losses	2c	1	
d	Other (Describe in Part XIV.)	2d	1	
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		
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5	
Part :	XIV Supplemental Information			
Part V	ete 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, ditional information.			

Schedule D (Fo	m 990) 2011	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
2011
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Inspection

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 its grants and other 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 its grants and other assistance outside the United States. 3 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 region (by type) (e g , fundraising, program services, investments, employees, agents, and a program service, describe specific type of expenditures for and investments offices in the region service(s) in region ın region contractors grants to recipients in region located in the region) (1) East Asia and the Pacific 0 0 **Grants to recipients** 50,529 (2) Sub-Saharan Africa 0 0 Grants to recipients 254,736 **Grants to recipients** (3) Cntrl America & Caribbean 0 0 30,000 (4) South America 0 0 Grants to recipients 4,336 (5) Sub-Saharan Africa Wtr filters & training 0 0 **Program services** 4,970 (6) Cntrl America & Caribbean 0 0 Water filters **Program services** 5,953 (7) South America 0 0 Program services Water filters 511 (8) (9) (10)(11) (12)(13)(14)(15)(16) (17)Sub-total . . . . . . 351,035 Total from continuation

351,035

c

Schedule F (F	Schedule F (Form 990) 2011	1					_		Page 2
Part II	Grants	and Other A	ssistance to Orga	anizations or Entitie	es Outside the I	United States. Con	plete if the organ	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,	s" to Form 990,
	Part IV,	line 15, for ar	Part IV, line 15, for any recipient who received	sceived more than \$	5,000. Check thi	is box if no one reci	pient received mo	more than \$5,000. Check this box if no one recipient received more than \$5,000	□ ▲ ·
	Part II co	an be duplica	Part II can be duplicated if additional space is needed.	pace is needed.			ı		
1 (a) h orga	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(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)			Subsahara	Water filters	69,830	69,830 Electronic tsfr			
(2)			Asia	Wells	47,385	47,385 Electronic tsfr			
(e)									
(4)									
(5)									
(9)							_		
(2)									
(8)									
(6)							- <b>-</b> -		

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(13)

(14)

(15)

(16)

(OE)

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(12)

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

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.

(a) Type of grant of assistance	(a) Region	(c) Number of recipients	(d) Amount of cash grant	cash disbursement	non-cash assistance	(g) Description of non-cash assistance	(n) Meniod of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(2)					:		
(8)							
(6)					- —		
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(40)							

Page	ě

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)	☑ 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)	<b></b> ✓ 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)	☑ No
_4_	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☑ 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)	☑ 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)	☑ No

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#### **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; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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.
······································

SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

OMB No. 1545-0047

Open to Public Inspection 80

20-8877288

Employer identification number Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance

Name of the organization

Wine to Water

Part I

Schedule I (Form 990) (2011) °N □ (h) Purpose of grant Ceramic water filters or assistance to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. √ Yes Well drilling Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" . . . . . . . (g) Description of non-cash assistance . . . . . (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 0 0 (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 26,800 87,600 (d) Amount of cash grant Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(c)(3) 501(c)(3) 26-2080497 20-5951140 (P) EIN 1 (a) Name and address of organization 6075 Harrison Merrillville, IN 46410 (2) Water is Life, 399 Carolina Ave or government Ste 200 Winter Park, FL (1) Filter Pure Filters Part II 9 N € Ð. 5 2 Q ල 9 8

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV Part III 8 က 4 Ŋ 9

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

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

Open to Public Inspection

Name of the organization Wine to Water Employer identification number 20-8877288

990 Part III 4d Other program services - Kenya bio-sand water filters:In 2011, Wine to Water helped Connect Africa's expansion into Kenya
through funding a bio-sand filter mold (\$1,200), tools (\$800), and labor/materials for 30 bio-sand filters. The mold and tools are being used
by locals as often as possible and the 30 filters provide 420 Kenyans with clean, safe drinking water Zimbabwe Kafusi Kizi Well Project:
Wine to Water funded to cost for drilling contractors to drill a deep well in Kafusi Kezi for an estimated 150 people in 2011. The project
involved the Austrian embassy funding the solar pump for the well Sri Lanka Hand-dug well project: In 2011, Wine to Water funded the
total cost of 2 wells in the Vaddavan community of Sri Lanka. The low cost of the wells is due to the community members doing all the labor
with the funds covering Fridsro's oversight and materials. The 2 wells service an estimated 200 locals with not only clean drinking water
drinking water, but enough water for the irrigation and livestock Ecuador Prison well project: The Lago Agrio men's prison well ran dry
2010, so the prisoners were forced to drink contaminated river water as the government was unwilling to fund a new well for them. So in
2011, Wine to Water funded the drilling of a new well for the 600 prisoners, as clean water is a human right for all people Peru ceramic
water filter project:Wine to Water funded 50 Filtron ceramic water filter through Inca Link and 15 filters through People of Peru for
distribution among their respective programs in Peru during 2011. These 65 filters have made daily clean water available for 325 Peruvians
living in the most extreme situations.
990 Part VI Section A 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 & Terrie Blevins, board members, are spouses.
990 Part VI Section B line 11b - The 990 is distributed to board members and officers for review before submission to the IRS.
909 Part VI Section B line 15a & b - The process for determining compensation for the top management official and other officers includes
researching and comparing the compensation range with comparable organizations.
990 Part VI Section C line 19 - By-laws, quarterly financial statements and annual 990 are posted on the Wine to Water website. These
documents are also available upon request.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
	•