DLN: 93493308025579 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization WATER FOUNDATION D Employer identification number B Check if applicable ☐ Address change 37-1833985 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 555 CAPITOL MALL NO 1155 ☐ Amended return □ Application pending (916) 414-3310 City or town, state or province, country, and ZIP or foreign postal code SACRAMENTO, CA $\,$ 95814 $\,$ G Gross receipts \$ 9,303,688 Name and address of principal officer H(a) Is this a group return for WADE CROWFOOT □Yes ☑No subordinates? 555 CAPITOL MALL NO 1155 H(b) Are all subordinates SACRAMENTO, CA 95814 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) ☐ 501(c)() **◄** (Insert no) □ 527 ☐ 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW WATERFDN ORG L Year of formation 2016 M State of legal domicile CA Summary 1 Briefly describe the organization's mission or most significant activities THE WATER FOUNDATION IS A NONPROFIT STRATEGIC PHILANTHROPY WORKING TO FUNDAMENTALLY TRANSFORM HOW WE MANAGE WATER IN THE WEST. WE HELP FUNDERS IDENTIFY AND ACT ON OPPORTUNITIES TO BETTER MANAGE WATER AND ENGAGE IN THOUGHTFUL, STRATEGIC GRANTMAKING TO OUR NONPROFIT PARTNERS TO DRIVE CHANGE. WE COMPLEMENT THESE ACTIVITIES WITH Activities & Governance CREATIVE COALITION BUILDING AND THOUGHTFUL ENGAGEMENT WITH HIGH-LEVEL DECISION MAKERS 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 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 14 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b 24,194 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 20,884,589 9,157,600 Ravenue Program service revenue (Part VIII, line 2g) . 66,320 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 26.785 18,662 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,472 36,095 20,914,846 9,278,677 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,679,608 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 4,681,217 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,854,193 2,225,823 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 2,650,132 2,900,333 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 9,435,743 11,555,563 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 11,479,103 -2,276,886 Assets or d Balances Beginning of Current Year End of Year 11,990,978 20 Total assets (Part X, line 16) . 13,325,797 **21** Total liabilities (Part X, line 26) 1,846,694 2,788,761 Net assets or fund balances Subtract line 21 from line 20 . 11,479,103 9,202,217 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-08-26 Signature of officer Date Sign Here IZETTE LECLERC DIR OF FINANCE/OPERATIONS Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00294123 **Paid** self-employed Firm's name BFBA LLP Firm's EIN ▶ 68-0000424 Preparer Use Only Firm's address ► 83 SCRIPPS DRIVE STE 210 Phone no (916) 924-0800 SACRAMENTO, CA 95825 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page 2
Pa	rt III Statement	of Program Service	e Accomplish	ments		
	Check If Sche	dule O contains a respo	nse or note to ar	y line in this Part III .		🗹
1	Briefly describe the o	organization's mission				
THE GRAI	WEST WE HELP FUND NTMAKING TO OUR NO	ERS IDENTIFY AND AC	T ON OPPORTUNI D DRIVE CHANGE	TIES TO BETTER MANA WE COMPLEMENT TH	NDAMENTALLY TRANSFORM HO NGE WATER AND ENGAGE IN T ESE ACTIVITIES WITH CREATI	HOUGHTFUL, STRATEGIC
2	Did the organization	undertake any significa	nt program servi	ces during the year wh	ıch were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	ese new services on Sch	nedule O			
3	Did the organization	cease conducting, or m	ake significant ch	anges in how it condu	cts, any program	
	services?					. 🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedul	e O			
4	Section 501(c)(3) an		ons are required t	o report the amount of	argest program services, as m grants and allocations to othe	
4a	(Code) (Expenses \$	4,479,458	including grants of \$	3,141,524) (Revenue \$)
	See Additional Data					
4b	(Code) (Expenses \$	2,185,460	including grants of \$	1,273,129) (Revenue \$)
40	See Additional Data) (Expenses \$	2,165,400	metading grants or \$	1,273,129) (Nevertue \$,
4c	(Code See Additional Data) (Expenses \$	1,091,270	including grants of \$	587,070) (Revenue \$)
	(Code) (Expenses \$		ıncludıng grants of \$	1,677,885) (Revenue \$	66,320)
	WATER CONSERVATION	AND EFFICIENCY, ECOSYS	STEMS RESTORATION	N, EMERGING STRATEGIES	S, REGISTRATION FEES FOR CONFE	RENCES AND EVENTS
4d	Other program servi	ces (Describe in Schedi	ıle O)			
				1 677 00	DE 1 / D	66 220 \
	(Expenses \$	2,671,273 ıncl	uding grants of \$	1,6//,88	35) (Revenue \$	66,320)

Form	990 (2018)			Page 3
Par	tiV 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
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		No
	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	Yes	
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		No
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		No
7		7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
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 organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 📆	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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16

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21

14b

15

16

17

18

19

20a

20b

21

22

Yes

Νo

Nο

Nο

Nο

Nο

Nο

Νo

No

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rai	Checklist of Required Schedules (continued)			
			Yes	No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
р.				

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

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

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.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Note. See the instructions for additional information the organization must report on Schedule O

Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

13b

13c

13a

14a

14b

15

No

Nο

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Part VI

Page 6

	Check if Schedule O contains a response or note to any line in this Part VI			 	✓
Se	ction A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	8		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	8		

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Nο of officers, directors or trustees, or key employees to a management company or other person? . 4 Νo Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .

5 Did the organization become aware during the year of a significant diversion of the organization's assets? . Νo Did the organization have members or stockholders? 6 Nο 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b Nο

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Yes 8b Yes Each committee with authority to act on behalf of the governing body? . 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 Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο 10a Nο b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes?

10a Did the organization have local chapters, branches, or affiliates? . 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes Did the organization have a written whistleblower policy? 13 Yes 13 14 Yes Did the organization have a written document retention and destruction policy? . 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 Yes

15b Yes 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 16a Nο 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 16h Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website 🗹 Another's website 🗹 Upon request 🗀 Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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

Part VII

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or 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

Check this box if neither the organization no	r any related o	rganızat	ion c	omp	ens	ated a	ny c	urrent officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	than o	ne b	ox, in of tor/t	t ch unle ficei rust	r and a	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) DAVID BECKMAN	2 00			,,						
CHAIRMAN, PRESIDENT		X		X				0	0	0
(2) SUSAN BELL DIRECTOR	1 00	х						0	0	0
(3) CELESTE CANTU	1 00	х						0	0	0
DIRECTOR		^						o o	0	0
(4) MICHAEL CONNOR DIRECTOR	1 00	x						0	0	0
(5) LAUREN DACHS VICE CHAIR, SECRETARY	1 00	х		х				0	0	0
(6) ERIC HEITZ DIRECTOR	1 00	х						0	0	0
(7) JIM LOCHHEAD DIRECTOR	1 00	х						0	0	0
(8) WADE CROWFOOT CEO	37 50	х		х				293,805	0	41,258
(9) LIZETTE LECLERC DIRECTOR OF FINANCE AND OPERATIONS	37 50			х				174,583	0	20,240
(10) JENNIFER SOKOLOVE DIRECTOR OF PROGRAMS AND STRATEGY	37 50				×			169,549	0	28,835
(11) ANDREW FAHLUND SENIOR PROGRAM OFFICER	37 50					×		159,700	0	35,281
(12) DOUGLAS MICHAEL MYATT PROGRAM OFFICER	37 50					×		127,688	0	23,134
(13) ELIZABETH SODERSTROM STRATEGIC PARTNERSHIPS OFFICER	37 50					×		133,738	0	18,019
(14) JULIET CHRISTIAN-SMITH SENIOR PROGRAM OFFICER	37 50					x		122,296	0	19,478
(15) ALEXANDRA PAXTON PROGRAM OFFICER	37 50					×		138,503	0	21,757

1b Sub-Total											
d Total (add lines 1b and 1c)	but not limited	to thos				e) who	rece	1,319,862 eived more than \$1	00,000	208,002	

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Name and business address

4

5

individual .

REDSTONE STRATEGY GROUP LLC

ECONOMIC & PLANNING SYSTEMS INC

3223 ARAPAHOE AVE STE 210 BOULDER, CO 80303

400 CAPITOL MALL 28TH FLOOR SACRAMENTO, CA 95814 EASTERN RESEARCH GROUP INC

PO BOX 845037 BOSTON, MA 02284

Section B. Independent Contractors

compensation from the organization ▶ 3

										+		
	Gub-Total					>						
d Ţ	otal (add lines 1b and 1c)		 			•		1,319,862		0		208,002
2	Total number of individuals (including of reportable compensation from the o		e list	ed a	bove	e) who	rece	eived more than	\$100,000			
											Yes	No
2	Did the every strong list any former	. ee	 با مما				ا					

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

106,372

3

4

5

(B)

Description of services

CONSULTING

CONSULTING

CONSULTING

Yes

Form 990 (2018)

Nο

No

211,800

119,000

(C)

Compensation

Part		Statement of	Revenue							rage 9
				a respo	onse or note to any	line in this Part	t VIII .			🗆
						(A) Total revenue	=	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1:	a Federated campaig	ns	1a				revenue		512 - 514
nts ints		b Membership dues		1b	<u> </u>					
3ra nou		c Fundraising events		1c	<u> </u>					
Š, (An		d Related organization		1d						
Giff		e Government grants (c		1e	<u> </u>					
ii.		f All other contributions		<u></u>	<u> </u> 					
tior ir S		and similar amounts n	ot included	1f	9,157,600					
iributions, Gifts, Grants Other Similar Amounts	١,	g Noncash contribution	ons included							
Contributions, Gifts, Grants and Other Similar Amounts		in lines 1a - 1f \$ _								
Cont		h Total. Add lines 1a	-1f	•	•	9,157,6	500			
ı,					Business	Code				
Program Service Revenue	2 a	GRANT RETURNED				900099	50,00		0,000	
₹ •	b	REGISTRATION FEES/C	ONF			621990	16,32	20 16	5,320	
10.6										
<u>\$</u>	d	· 		_						
Ē	е	,		_						
ogra	f	All other program se	rvice revenue							
ďΞ	g	Total. Add lines 2a-2	2f		>	66,320				
-		Investment income (i			ınterest, and other	1 ,	12.672			12.672
		similar amounts) .				14	13,673			43,673
		Income from investm Royalties	ent of tax-exe							
	٠	Royaldes	(ı) Rea		(II) Personal	<u> </u>				
	6a	Gross rents			. ,	1				
		- Loss rental expenses		36,095 0		_				
		Less rental expenses		U						
	c	Rental income or (loss)		36,095		1				
		Net rental income o	r (loss)] 3	36,095			36,095
	•	- Net rental income o	(i) Securit		(II) Other		-,			30,033
	7a	Gross amount			, ,	1				
		from sales of assets other								
		than inventory								
	t	 Less cost or other basis and 			25,01:	L				
		sales expenses Gain or (loss)			-25,01:	1				
		l Net gain or (loss) .			<u> </u>		25,011			-25,011
	8 a	Gross income from f	_							
ne		(not including \$ contributions reporte		of						
Other Revenue		See Part IV, line 18		а	ĺ					
a		Less direct expense		b						
her		Net income or (loss)			rents •	1				
ŏ	94	Gross income from o See Part IV, line 19		es						
				а						
		Less direct expense		Ь						
		Net income or (loss) Gross sales of invent		activit	iles •	1				
		returns and allowand								
				а						
		Less cost of goods		b						
	_	Net income or (loss) Miscellaneous		inven	tory <u>►</u> Business Code					
-	11					-				
	Ł	·								
	c	:			 					
	c	All other revenue .								
	e	Total. Add lines 11a	-11d		•					
	12	? Total revenue. See	Instructions							
						9,27	8,677	66,320)[0 54,757 Form 990 (2018)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Form 990 (2018) Page **10** Statement of Functional Expenses **✓** Check if Schedule O contains a response or note to any line in this Part IX . (B) (C) Do not include amounts reported on lines 6b, (A) (D) Program service Management and 7b, 8b, 9b, and 10b of Part VIII. Total expenses Fundraisingexpenses expenses general expenses 1 Grants and other assistance to domestic organizations and 6,679,608 6,679,608 domestic governments See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 **3** Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16 4 Benefits paid to or for members 728,270 497,774 230,496 5 Compensation of current officers, directors, trustees, and key employees . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,175,639 804,092 371,547 7 Other salaries and wages 62,577 43,679 18,898 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . 259,337 170,426 88,911 **9** Other employee benefits . 10 Payroll taxes . . 11 Fees for services (non-employees) a Management . . 29,642 18,928 10.714 **b** Legal . 68,615 43.147 25,468 c Accounting 90,095 90,095 **d** Lobbying . e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column 1,691,580 1,593,991 97,589 (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion . 51,248 31,231 20,017 13 Office expenses . 34,739 21,435 13,304 14 Information technology 15 Royalties 399,105 250,179 148,926 16 Occupancy . 111,443 76,764 34.679 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 76,076 53,486 22,590 19 Conferences, conventions, and meetings 20 Interest . . 21 Payments to affiliates . 22 Depreciation, depletion, and amortization 65,881 41,191 24,690 6,807 2,772 4,035 23 Insurance . 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) a DUES & SUBSCRIPTIONS 13,032 7,400 5,632 **b** BOARD EXPENSES 11,869 11,869 c d All other expenses 11,555,563 10,427,461 Ω

1,128,102

Form 990 (2018)

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720) Form 990 (2018)

34

Total liabilities and net assets/fund balances

		(A) Beginning of year		(B) End of year
	1 Cash-non-interest-bearing	8,975,990	1	11,047,967
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	4,040,000	4	511,526
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ζ.	6 Loans and other receivables from other disqualified persons (as defined unde section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	er	6	
نځ	7 Notes and loans receivable net		7	

12,969

375,516

11,990,978

Form **990** (2018)

S		section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	ations o (see in	of section 501(c)(9) structions) Complete		6	
eţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			25,434	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	469,743			
	b	Less accumulated depreciation	10 b	94,227	268,373	10c	
	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				14	
	4-	011 1 6 5 107 1 44			16,000	4.5	

	13	Investments—program-related See Part IV, line II		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	16,000	15	43,000
	16	Total assets.Add lines 1 through 15 (must equal line 34)	13,325,797	16	11,990,978
	17	Accounts payable and accrued expenses	1,846,694	17	2,788,761
	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	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
(E)		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unconversely where and leave provide to consider a third provide		74	

	1/	Accounts payable and accrued expenses	1,040,094	1/	2,700,701
	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	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qei		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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26	Total liabilities.Add lines 17 through 25	1,846,694	26	2,788,761
5		Organizations that follow SEAS 117 (ASC 958), check here			

_					1
gei		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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26	Total liabilities.Add lines 17 through 25	1,846,694	26	2,788,761
Balances	27	Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	2,342,574	27	2,921,692
Bal	28	Temporarily restricted net assets	9,136,529	28	6,280,525
nnd	29	Permanently restricted net assets		29	
Fui		Organizations that do not follow SFAS 117 (ASC 958),			
s or	30	check here ► □ and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
sets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	11,479,103	33	9,202,217
Z	34	Total liabilities and net accets/fund balances	13 325 797	34	11 990 978

13,325,797

34

Form	990 (2018)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
_					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			278,677
2	Total expenses (must equal Part IX, column (A), line 25)	2			.555,563
3	Revenue less expenses Subtract line 2 from line 1	3			276,886
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		11	479,103
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		9	202,217
Pa	tXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basis,			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ıngle			

3b

Form **990** (2018)

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

Additional Data

Software ID:

Software Version:

EIN: 37-1833985

Name: WATER FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

MAP" FOR IMPLEMENTATION OF THE SUSTAINABLE GROUNDWATER MANAGEMENT ACT

RESILIENT WATER SUPPLIES - THROUGH PROGRAM INVESTMENTS IN NON-PROFIT ORGANIZATIONS AND CONSULTANTS, THE WATER FOUNDATION WORKED TO IMPROVE THE MANAGEMENT OF WATER SUPPLIES IN CALIFORNIA AND THE WESTERN U.S. IN 2018, WATER FOUNDATION GRANTS SUPPORTED MARKET-BASED GROUNDWATER SOLUTIONS, BACKED THE DEVELOPMENT OF A TOOL TO INTEGRATE GROUNDWATER DEPENDENT ECOSYSTEMS INTO GROUNDWATER PLANS IN CALIFORNIA, HELPED GROW THE NGO GROUNDWATER COLLABORATIVE TO 65 GROUPS, AND ORGANIZED THE GROUNDWATER LEADERSHIP FORUM THE WATER FOUNDATION ALSO FUNDED THE GROUNDWATER EXCHANGE, A NEW WEBSITE FOR AGENCIES, KEY STAKEHOLDERS, AND COMMUNITY MEMBERS SEEKING GUIDANCE, TOOLS, AND RESOURCES ABOUT SUSTAINABLE GROUNDWATER MANAGEMENT, THE DEVELOPMENT OF EDUCATIONAL MATERIALS TARGETED TO GROWERS, AND THE CREATION OF A "SYSTEMS

Form 990, Part III, Line 4b: LOS ANGELES - IN 2018, WATER FOUNDATION INVESTMENTS SUPPORTED THE NATION'S LARGEST PUBLIC FINANCING PROGRAM FOR GREEN STORMWATER INFRASTRUCTURE THE FOUNDATION ALSO FUNDED THE OURWATERLA COALITION, A DIVERSE GROUP OF POWERFUL ADVOCATES FOR NATURE-BASED INFRASTRUCTURE IN LOS ANGELES AND ENGAGED A BROAD NETWORK OF ENVIRONMENTAL, COMMUNITY-BASED, AND PUBLIC HEALTH ORGANIZATIONS IN THE LA REGION TO MAP

CONNECTIONS AND GAPS ACROSS WATER-FOCUSED FFFORTS FROM STORMWATER TO DRINKING WATER

Form 990, Part III, Line 4c: DRINKING WATER - TO ADVANCE SOLUTIONS TO THE SAFE DRINKING WATER CRISIS IN CALIFORNIA, THE WATER FOUNDATION PROVIDED FUNDING TO ENCOURAGE ELECTED LEADERSHIP TO ELEVATE THE ISSUE OF SAFE DRINKING WATER IN THE 2018 STATE OF THE STATE ADDRESS AND PROVIDE FUNDING FOR SAFE DRINKING WATER IN THE 2018 BUDGET, SUPPORT TWO SUCCESSFUL CONSOLIDATION BILLS, AB 2501 AND SB 1215, AND HELP DEFEAT AB 2050, SECURE \$3 MILLION TO ENABLE

THE WATER BOARD TO CONDUCT A RIGOROUS SAFE DRINKING WATER NEEDS ASSESSMENT AND UPDATE THE HUMAN RIGHT TO WATER PORTAL, AND BOLSTER A

STRONG PARTNERSHIP BETWEEN AGRICULTURAL INTERESTS AND ENVIRONMENTAL JUSTICE ORGANIZATIONS

CHEDULE Form 990 or 100EZ)	Со	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.					2018 Open to Public
partment of the Treasi ernal Revenue Service ame of the organ		► Go to	www.irs.gov/Forms	990 for the late	est information	Employer identific	Inspection
TER FOUNDATION	.zucion					37-1833985	action number
			us (All organization				
-	•		e it is (For lines 1 thro	•	•		
ш	,	·	ssociation of churches			(A)(i).	
			1)(A)(ii). (Attach Sch	,	.,		
	·	•	vice organization desci			-	
name,	ity, and state		ed in conjunction with	·			·
	nızatıon operat A)(iv). (Comp		t of a college or univei	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170
		•	governmental unit de	scribed in secti e	on 170(b)(1)(A	ı)(v).	
		ormally receives)(vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	nit or from the gener	al public described ii
A comr	unity trust des	cribed in sectio i	170(b)(1)(A)(vi)	(Complete Part I	I)		
			escribed in 170(b)(1) ee instructions Enter				ege or university or
from a	tivities related t ent income and	to its exempt fur d unrelated busir	(1) more than 331/3% actions—subject to cert less taxable income (le amplete Part III)	tain exceptions,	and (2) no more	than 331/3% of its si	ipport from gross
•			d exclusively to test for	r public safety S	See section 509	(a)(4).	
more p	ıblıcly supporte	d organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See <mark>section 509(</mark> a	
Type I organiz	A supporting of ation(s) the pov	organization oper	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
manag	ment of the su		pervised or controlled in ation vested in the sand and C.				
			supporting organization				ted with, its
Type I functio	I non-functio	nally integrate The organization	ions) You must com d. A supporting organi n generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wirequirement and	th its supported organ	
Check	nis box if the oi	rganization recei	ved a written determin	ation from the I		pe I, Type II, Type II	I functionally
-		non-functionally ed organizations	integrated supporting	organization			
			upported organization(s)			
(i) Name of organız	upported	(ii) EIN (iii) Type of (iv) Is the organization listed in your governing document? more		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)		
				Yes	No		
tal							
	luction Act No	ntice see the I	 nstructions for		5F .	Schedule A (Form 9	

instructions

(b)(1)(A)(ix)

Page 2

	(Complete only if you ch III. If the organization fa						d to qualify	under Part
	ection A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e)	2018	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not				20,884,589		9,157,600	30,042,189
_	include any "unusual grant ")							
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				20,884,589		9,157,600	30,042,189
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							20.043.400
	line 4							30,042,189
S	ection B. Total Support							
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2	2018	(f)Total
_	(or fiscal year beginning in) ▶	(-,	(-)	(-)				
7	Amounts from line 4				20,884,589		9,157,600	30,042,189
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and				26,785		79,768	106,553
	income from similar sources							
9	Net income from unrelated business							
-	activities, whether or not the							
	business is regularly carried on							
10								
	or loss from the sale of capital							
	assets (Explain in Part VI) Total support. Add lines 7 through							
11	10							30,148,742
12	Gross receipts from related activities,	etc (see instructi	ons)			12		19,792
13	First five years. If the Form 990 is fo	or the organization	n's first, second, t	hird, fourth, or fift	th tax vear as a sect	on 501	(c)(3) orga	nization.
	check this box and stop here	_			· · · · · · · · · · · · · · · · · · ·		· · · · · <u> </u>	,
_	ection C. Computation of Public							
				column (f))		144		
14				Column (1))		14		
	Public support percentage for 2017 Sc					15	<u> </u>	
16a	33 1/3% support test—2018. If the	organization did	not check the box	x on line 13, and li	ine 14 is 33 1/3% or	more, o	check this b	
	and stop here. The organization quali							▶□
b	33 1/3% support test—2017. If th	e organization die	d not check a box	on line 13 or 16a,	, and line 15 is $33 1/3$	3% o r r	nore, check	
	box and stop here. The organization	qualifies as a pu	blicly supported o	rganization				▶ □
17 a	10%-facts-and-circumstances test	t —2018. If the or	ganization did no	t check a box on I	ine 13, 16a, or 16b,	and line	e 14	
	ıs 10% or more, and ıf the organizatıo							
	in Part VI how the organization meets	the "facts-and-ci	rcumstances" test	: The organization	qualifies as a public	ly supp	orted	
	organization							ightharpoons
b	10%-facts-and-circumstances tes	st—2017. If the o	organization did n	ot check a box on	line 13, 16a, 16b, oi	⁻ 17a, a	ind line	
	15 is 10% or more, and if the organiz							
	Explain in Part VI how the organization	on meets the "fact	ts-and-cırcumstar	nces" test. The org	ianization qualifies as	s a publ	licly	
	supported organization							▶ □
18	Private foundation. If the organizati	on did not check	a box on line 13,	16a, 16b, 17a, or	17b, check this box	and see	<u> </u>	

Р	art IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		
	(Complete only if you c	hecked the box	on line 10 of Pa	art I or if the or	ganization failed		er Part II. If
	the organization fails to	qualify under	the tests listed b	pelow, please co	omplete Part II.))	
Se	ection A. Public Support		T	Г			1
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
•	the organization without charge						
6 72	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and						
/ a	3 received from disqualified persons						
Ь	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)						
Se	ection B. Total Support						
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
0	(or fiscal year beginning in) ► Amounts from line 6			. ,			
L0a	Gross income from interest,						
LUa	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
Ь	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							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı ı's fırst, second. th	urd, fourth, or fift	h tax vear as a se	ction 501(c)(3) o	rganization.
	check this box and stop here	.	,	,,,	,		▶ □
Se	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2018 (lin	e 8, column (f) d	ıvıded by line 13,	column (f))		15	
16	Public support percentage from 2017 S	ichedule A, Part I	II, line 15			16	
Se	ection D. Computation of Investi	ment Income	Percentage				
17	Investment income percentage for 201			lıne 13, column (f))	17	
18	Investment income percentage from 2	017 Schedule A,	Part III, line 17			18	
	331/3% support tests—2018. If the		•	on line 14, and lir	ne 15 is more than		e 17 ıs not
	more than 33 1/3%, check this box and						▶□
	33 1/3% support tests—2017. If the						
J	not more than 33 1/3%, check this box	-			*		▶ □
20	Private foundation. If the organization	-	-				▶□

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

answer line 10b below

the organization had excess business holdings)

Schedule A (Form 990 or 990-EZ) 2018

Section A. All Supporting Organizations Yes

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,		
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509		

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2) 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

2 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below

4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a amendment to the organizing document)

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (1) its supported organizations. (11) individuals that are part of the charitable class benefited by one or more of its

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7

8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI. 9b

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pa	rt IV Supporting Organizations (continued)			
	cupper unity or gamma units (community)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the		\vdash	
u	governing body of a supported organization?			
h	A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations	110		
	ection b. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	\sqcup	
2				
	organization			
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	,, , , , , , , , , , , , , , , , , , , ,			<u> </u>
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	j		
		1	\vdash	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	-		
	b			
	c	ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.		\vdash	
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	26		

m -	
/I) See	
ıgh E	
(B) Current Year	
(optional)	

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2018

Page 6

	Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations in		
~		(A) Prior Year	

	instructions. All other Type III non-functionally integrated supporting organiza	tions i	must complete Sections A	through E
	Section A - Adjusted Net Income		(A) Prior Year	(B) C (o
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		

4 5

Add lines 1 through 3

Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions)

1

5

7

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)

a Average monthly value of securities **b** Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c)

e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d

Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6

7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

8

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

4

Enter greater of line 2 or line 3

5 Income tax imposed in prior year

temporary reduction (see instructions)

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3 4

6

7

8

1

1a

1b

1c 1d

2

3

4

5

6

7

8

1

6

(A) Prior Year

a Applied to underdistributions of prior years

b Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions 6 Remaining underdistributions for 2018 Subtract

lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2019. Add lines

31 and 4c 8 Breakdown of line 7 a Excess from 2014.

Schedule A (Form 990 or 990-EZ) (2018)

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Additional Data

Software ID: Software Version:

EIN: 37-1833985

Name: WATER FOUNDATION

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See Instructions)

Facts And Circumstances Test

SCHEDULE C

Political Campaign and Lobbying Activities

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

Open to Public

OMB No 1545-0047

DLN: 93493308025579

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

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

Inspection

• S • S f the • S • S f the [Prox	Section 501(c) (other than section section 527 organizations Comple organization answered "Yes" of Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form at have filed Form 5768 (election under at have NOT filed Form 5768 (election under an Form 990, Part IV, Line 5 (Proxy Ta as), then	ts I-A and C below 990-EZ, Part VI, Iir section 501(h)) Co inder section 501(h	ne 47 (Lobbying Activity omplete Part II-A Do not)) Complete Part II-B D nstructions) or Form 99	ies), then complete Part II-B o not complete Part II-A 90-EZ, Part V, line 35c
	ne of the organization FER FOUNDATION			Employer id	entification number
***				37-1833985	
Par	t I-A Complete if the orga	nization is exempt under secti	on 501(c) or is	a section 527 orga	nization.
1	"political campaign activities")	nization's direct and indirect political ca	mpaign activities ir	Part IV (see instruction	s for definition of
2	Political campaign activity expend	· · ·		•	\$
3	Volunteer hours for political camp		on F01/a\/3\		<u></u>
	-	inization is exempt under secti			
1	•	ax incurred by the organization under s		•	\$
2	·	ax incurred by organization managers i		•	\$
3	If the organization incurred a sec	ction 4955 tax, did it file Form 4720 for	this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the orga	nization is exempt under secti	on 501(c), exce	ept section 501(c)(3	3).
1	Enter the amount directly expend	ded by the filing organization for section	n 527 exempt funct	ion activities	\$
2	Enter the amount of the filing org function activities	ganization's funds contributed to other	organizations for se	ection 527 exempt	\$
3	Total exempt function expenditur	res Add lines 1 and 2 Enter here and o	on Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file Fo	rm 1120-POL for this year?			Yes No
5	organization made payments Fo of political contributions received	employer identification number (EIN) or r each organization listed, enter the am that were promptly and directly delive see (PAC) If additional space is needed	nount paid from the red to a separate p	filing organization's fund olitical organization, sucl	ds Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	contributions received
1					
2					
3					
4					
5					
6					
or P	aperwork Reduction Act Notice, see	the instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C	C (Form 990 or 990-EZ) 2018

175,166

148,166

55,210

452,581

181,945

35,983

Schedule C (Form 990 or 990-EZ) 2018

627,747

330,111

495,167

91,193

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

No

Yes

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE D**

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

DLN: 93493308025579 OMB No 1545-0047

Open to Public Inspection

	me of the organization TER FOUNDATION				Emplo	oyer identification number
					- 1	33985
Pa	organizations Maintaining Donor Advi				or Acco	unts.
	Complete if the organization answered "Ye			sed funds	,	b)Funds and other accounts
1	Total number at end of year	(4) 501101	uuv	Jed rands		by and other decounts
- 2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisor	rs in writing that th		ets held in donor a	l dviced fu	nds are the
	organization's property, subject to the organization's ex	clusive legal contro	?			☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?					
Pa	t III Conservation Easements. Complete if the	ne organization ai	iswe	red "Yes" on Fori	n 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the orga	nızatıon (check all t	nat a	pply)		
	\square Preservation of land for public use (e g , recreatio	n or education)		Preservation of ar	historic	ally 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 easement on the last day of the tax year	qualified conservati	on co	entribution in the fo	rm of a <u>c</u>	conservation Held at the End of the Year
а	Total number of conservation easements				2a	Heid at the End of the Year
a b	Total acreage restricted by conservation easements				2b	
C	Number of conservation easements on a certified histori	c structure included	ın (a	1)	2c	
d	Number of conservation easements included in (c) acqu		•	•	2d	
	structure listed in the National Register					
3	Number of conservation easements modified, transferre tax year •	ed, released, extingi	ıısne	d, or terminated by	tne orga	inization during the
4	Number of states where property subject to conservation	n easement is locat	ed 🕨			
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		ng, ir	spection, handling	of violati	ons,
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of vi	olatio	ns, and enforcing c	onservat	
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violatio	ns, a	nd enforcing conser	vation e	asements during the year
8	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?	above satisfy the r	equir	ements of section 1	70(h)(4)	(B)(I)
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the org				ement, and
Par	TITI Organizations Maintaining Collections Complete if the organization answered "Ye				er Sim	ilar Assets.
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, e	ducat	ion, or research in		
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1					▶\$
(i	ii)Assets included in Form 990, Part X					▶ \$
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS				ıncıal gaı	
а	Revenue included on Form 990, Part VIII, line 1	, ,	, -			▶ \$
b	Assets included in Form 990, Part X					▶\$
For	Paperwork Reduction Act Notice, see the Instructio	ns for Form 990.		Cat No	52283D	Schedule D (Form 990) 20:

Part	1111	Organizations Maintaining Col	lections of Art,	Histor	ical T	reası	ıres, or	Other	Similar A	ssets (contir.	ued)	
3		the organization's acquisition, accession (check all that apply)	n, and other record	s, check	any of	the fo	ollowing t	hat are a	sıgnıfıcant	use of it	s colle	ction	
a		Public exhibition d Loan or exchange programs											
b		Scholarly research		е		Othe	r						
С		Preservation for future generations											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII												
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets 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" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.												
1a										o			
b	If "Ye	s," explain the arrangement in Part XIII	and complete the	following	table		[Amount			_
С		ning balance	·	-				1c					_
d	Addıtı	ons during the year					[1d					_
е	Distrib	butions during the year						1e					_
f	Endin	g balance						1f					_
2a	Did th	ne organization include an amount on Fo	rm 990, Part X, line	e 21, for	escrov	v or cu	ıstodıal a	ccount lia	bility?	. 🗆 Y	es	\square N	o
b		s," explain the arrangement in Part XIII											
Pai	rt V	Endowment Funds. Complete If											
			(a)Current year	(b)₽	rıor yea	r	(c) Two ye	ears back	(d)Three ye	ars back	(e) Fo	ur year	s back
1a	Beginni	ing of year balance											
b (Contrib	utions											
C	Net inv	estment earnings, gains, and losses											
		or scholarships											
		expenditures for facilities ograms											
f ,	Admini	strative expenses											
g		year balance											
2		le the estimated percentage of the curre	ent year end balanc	e (line 1	g, colu	mn (a)) held a	s					
а		designated or quasi-endowment >											
b	Perma	anent endowment ▶											
c		orarily restricted endowment >											
_	The percentages on lines 2a, 2b, and 2c should equal 100%												
3a		nere endowment funds not in the posses ization by	sion of the organiza	ation tha	t are n	eia an	ia aamini	sterea ro	r tne		Г	Yes	No
	_	related organizations								3	a(i)		
	(ii) re	elated organizations								3	a(ii)		
b		s" on 3a(11), are the related organization	•			?.					3b		
4		ibe in Part XIII the intended uses of the		owment	funds								
Par	t VI	Land, Buildings, and Equipmer Complete if the organization answ		orm 000) Dart	T\/ li	ıno 11a	Soo For	-m 000 B	art V II	no 10		
	Descri	ption of property (a) Cost or oth (investme	er basis (b) Cos	st or other					lepreciation			ok valu	e
1a	Land												
b	Building	gs											
		old improvements											
d	Equipm	nent											
					46	69,743			94,227				375,516
Tota	I. Add I	ines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colui	mn (B)	, line .	10(c)) .		>				375,516

Part VII Investments—Other Securities.	Complete if the organiza	.ioii aiiswe			
See Form 990, Part X, line 12. (a) Description of security or ca (including name of security		(b) Book value	Cost	(c) Method of valuation or end-of-year market value	
1) Financial derivatives					
2) Closely-held equity interests . 3)Other					
A)					
3)					
0)					
· ()					
)					
5)					
H)					
otal. (Column (b) must equal Form 990, Part X, col (B) line	22)				
Investments—Program Related Complete if the organization answe		art IV lin	- 11c See Fo	rm 990 Part V line 13	
(a) Description of investment		ook value		(c) Method of valuation	
.)			Cost	or end-of-year market value	
2)					
3)					
, ;)					
· · · · · · · · · · · · · · · · · · ·					
· ·)					
· ')					
3)					
9)					
9) ntal. (Column (h) must equal Form 990. Part X. col (B) line 1	3 }				
otal. (Column (b) must equal Form 990, Part X, col (B) line 1	ation answered 'Yes' on For	n 990, Parl	IV, line 11d S		
otal. (Column (b) must equal Form 990, Part X, col (B) line 1		n 990, Part	IV, line 11d S	ee Form 990, Part X, line 15 (b) Boo	k value
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1 Part IX Other Assets. Complete if the organization.)	ation answered 'Yes' on For	n 990, Part	IV, line 11d S		k value
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1 Part IX Other Assets. Complete if the organization.)	ation answered 'Yes' on For	n 990, Part	IV, line 11d S		k value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1 art IX Other Assets. Complete if the organiz	ation answered 'Yes' on For	m 990, Part	IV, line 11d S		k value
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1 Part IX Other Assets. Complete if the organization.)	ation answered 'Yes' on For	m 990, Part	IV, line 11d S		k value
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1 Other Assets. Complete if the organization (c)	ation answered 'Yes' on For	m 990, Part	: IV, line 11d S		k value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1 Part IX Other Assets. Complete if the organization of the complete in th	ation answered 'Yes' on For	m 990, Part	: IV, line 11d S		k value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1 Part IX Other Assets. Complete if the organization of the organi	ation answered 'Yes' on For	m 990, Part	IV, line 11d S		k value
Other Assets. Complete if the organization of	ation answered 'Yes' on For	m 990, Part	IV, line 11d S		k value
Other Assets. Complete if the organization of the complete in the comp	ration answered 'Yes' on For	n 990, Part	IV, line 11d S		k value
Other Assets. Complete if the organization of the complete if the complete	(a) Description (B) line 15)			(b) Boo	k value
tal. (Column (b) must equal Form 990, Part X, col (B) line 1 art IX Other Assets. Complete if the organiz)))))))))))) ptal. (Column (b) must equal Form 990, Part X, col (B) line 1 See Form 990, Part X, line 25.	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For		(b) Boo	k value
Other Assets. Complete if the organization of liabilities. Complete if the organization of liabilities. (a) Description of liabilities.	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
Other Assets. Complete if the organization of liabilities. Complete if the organization of liabilities. (a) Description of liabilities.) (a) Description of liabilities.	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1 art IX Other Assets. Complete if the organize (b) Other Assets. Complete if the organize (c) Other Assets. Complete if the organize (c) Other Assets. Complete if the organize (c) Other Liabilities. Complete if the organize (a) Description of liability (b) Federal income taxes	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1 art IX Other Assets. Complete if the organize (b) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1 art IX Other Assets. Complete if the organize Other Liabilities. Complete if the organize See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
Other Assets. Complete if the organization of the complete if	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
Other Assets. Complete if the organization of the complete if	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
Other Assets. Complete if the organization of the complete if	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
Other Assets. Complete if the organization of the Assets. Complete if the Other Liabilities.	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value
Other Assets. Complete if the organization of	(a) Description (B) line 15) organization answered 'Yes' on Formation (B) line 15 (B)	es' on For	 n 990, Part I	(b) Boo	k value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Page 4

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

Part XI

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 11,530,574 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a 2b

2c c 2d Other (Describe in Part XIII) d

Add lines 2a through 2d 2e 3 11,530,574

3

4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . 4a

4b 24.989 b 4c 24,989

5 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 11.555.563 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Return Reference Explanation

See Additional Data Table

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 37-1833985

Name: WATER FOUNDATION

Supplemental Information

Return Reference

Explanation

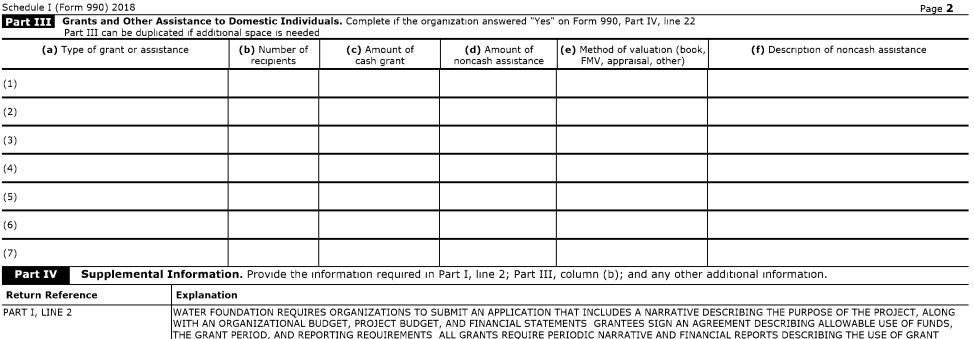
PART XI, LINE 4B - OTHER LOSS ON SALE OF ASSETS -25,011 GRANTS RETURNED RECLASSIFIED TO INCOME 50,000

ADJUSTMENTS

upplemental Information							
Return Reference	Explanation						
PART XII, LINE 4B - OTHER ADJUSTMENTS	LOSS ON SALE OF ASSETS -25,011 GRANT RETURNED RECLASSIFIED TO INCOME 50,000						

Su

DLN: 93493308025579 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasurv Internal Revenue Service Name of the organization Employer identification number WATER FOUNDATION 37-1833985 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018



FUNDS INCLUDING ACTIVITIES AND OUTCOMES ADDITIONALLY, STAFF MAINTAINS CONTACT WITH GRANTEES THROUGHOUT THE GRANT PERIOD

Additional Data

SEBASTOPOL, CA 95472

AMERICAN RIVERS

WASHINGTON, DC 20005

1400

1101 14TH STREET NW SUITE

Software ID: Software Version: EIN: 37-1833985 Name: WATER FOUNDATION

23-7305963

Form 990 Schedule T. Part TJ. Grants and Other Assistance to Domestic Organizations and Domestic Governments

501 (C)(3)

Form 990,5 chedule 1, Fart 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AG INNOVATIONS 101 MORRIS ST STE 212	68-0462304	501 (C)(3)	100,000				WATER ACCESS AND CONSERVATION			

WATER ACCESS AND

CONSERVATION

290,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-1624102 501 (C)(3) 75.000 WATER ACCESS AND AUDUBON CALIFORNIA CONSERVATION

220 MONTGOMERY ST STE 1000 SAN FRANCISCO, CA 94104 BAYORG 90-0401015 501 (C)(3) 29.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN FRANCISCO, CA 94133

WATER ACCESS AND THE EMBARCADARO AT BEACH CONSERVATION STREET

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-4834043 501 (C)(3) 105.000 WATER ACCESS AND CALIFORNIA COASTKEEPER ALLIANCE CONSERVATION

156 SECOND STREET SAN FRANCISCO, CA 94105					
CALIFORNIA LEAQUE OF CONSERVATION VOTERS 350 FRANK H OQAWA PLAZA STE 1100	94-3169564	501 (C)(4)	18,920		WATER ACCESS AND CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OAKLAND, CA 94612

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 77-0566513 501 (C)(3) 100.000 IWATER ACCESS AND CALIFORNIA PUBLIC INTEREST RESEARCH GROUP CONSERVATION

RESEARCH GROUP

1111 BROADWAY THIRD FL

OAKLAND, CA 94607

CALIFORNIA TROUT 23-7097680 501 (C)(3) 170,000

WATER ACCESS AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

360 PINE STREET 4TH FLOOR

SAN FRANCISCO, CA 94104

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 68-0260751 501 (C)(3) 40.000 WATER ACCESS AND CENTER FOR ENERGY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

99 CHAUNCY STREET 6TH

BOSTON, MA 02111

FLOOR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-7128611 501 (C)(3) 165.000 CLEAN WATER FUND WATER ACCESS AND 350 FRANK OGAWA PLAZA STE CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OAKLAND, CA 94612

CLIMATE RESOLVE 46-4736278 501 (C)(3) 35,000 WATER ACCESS AND 525 S HEWITT ST CONSERVATION CONSERVATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance COMITE CIVICO DEL VALLE 33-0411322 501 (C)(3) 65.000 WATER ACCESS AND INC CONSERVATION

235 MAIN ST
BRAWLEY, CA 92227

COMMUNITY ALLIANCE WITH 91-2914745 501 (C)(3) 40,000

WATER ACCESS AND CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 363 DAVIS, CA 95617

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-4302067 501 (C)(3) 295,000 COMMUNITY PARTNERS WATER ACCESS AND CONSERVATION 1000 NEALAMEDA CEDETE CEL

240					CONSERVATION
LOS ANGELES, CA 90012					
COMMUNITY WATER CENTER	80-0267674	501 (C)(3)	230.000		WATER ACCESS AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

900 W OAK AVE

VISALIA, CA 93291

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance COMMUNITY WATER CENTER 82-4259151 501 (C)(4) 110.000 WATER ACCESS AND ACTION FUND CONSERVATION

900 W OAK AVE VISALIA. CA 93291 COUNCIL FOR WATERSHED 95-4589325 501 (C)(3) 50.000 WATER ACCESS AND CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HEALTH 700 N ALAMEDA ST

LOS ANGELES, CA 90012

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance DATIV ACTO ODCANIZATION 20 2051250 EO1 (C)(2) 4E 0001 WATER ACCESS AND VATION

PO BOX 293 PETALUMA, CA 94953	20-3851259	501 (C)(3)	45,000		CONSERVATION
DEFENDERS OF WILDLIFE	53-0183181	501 (C)(3)	50,000		WATER ACCESS AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1130 17TH STREET NW WASHINGTON, DC 20036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance DIGDEEP 46-0686920 501 (C)(3) 40.000 WATER ACCESS AND 23308 DESCANSO DR CONSERVATION

LOS ANGELES, CA 90026

ECONOMIC DEVELOPMENT 75-3643339 501 (C)(3) 9,500

WATER ACCESS AND CORPORATION OF LA COUNTY 444 S FLOWER ST 37TH FLOOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90071

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 11-6107128 501 (C)(3) 359,533 WATER ACCESS AND ENVIRONMENTAL DEFENSE ATION

FUND 257 PARK AVE SOUTH					CONSERVATION
NEW YORK, NY 10010					
HEAL THE BAY	95-4031055	501 (C)(3)	125,000		WATER ACCESS AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SANTA MONICA, CA 90401

1444 9TH STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance HISPANIC ACCESS 27-2589206 501 (C)(3) 25 000 WATER ACCESS AND CONSERVATION

THE TABLE	L, 2307200	301 (0)(3)	25,000	
FOUNDATION				
1030 15TH ST BW STE B1 150				
WASHINGTON, DC 20005				

SAN FRANCISCO, CA 94108

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

40.000 **IMAGINE H20** 26-1453882 501 (C)(3) WATER ACCESS AND 212 SUTTER 200 CONSERVATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-3779389 501 (C)(3) 50.000 KORFATOWN YOUTH AND WATER ACCESS AND COMMUNITY CENTER INC CONSERVATION

WATER ACCESS AND

CONSERVATION

COMMUNITY CENTER INC
3727 W 6TH ST STE 300
LOS ANGELES, CA 90020

7.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

LOS ANGELES, CA 90020

LA VOICE
3660 WILSHIRE BLVD STE 602

LOS ANGELES, CA 90010

37-1770397

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance LEADERSHIP COUNSEL FOR 46-1517800 501 (C)(3) 125 000 WATER ACCESS AND

JUSTICE AND ACCOUNTABILITY 764 P STREET STE 012 FRESNO, CA 93721				CONSERVATION
	 (-/(-/			

LOS ANGELES WATERKEEPER 95-4444787 501 (C)(3) 50,000 IWATER ACCESS AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

120 BROADWAY STE 105

SANTA MONICA, CA 90401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 45-0573269 501 (C)(3) 10.000 WATER ACCESS AND MAGNUM FOUNDATION CONSERVATION

WATER ACCESS AND

CONSERVATION

100,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

59 E 4TH ST 7W NEW YORK, NY 10003

91-2166435

MULTIPLIER

405 14TH STREET STE 164

OAKLAND, CA 94612

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant non-cash assistance organization ıf applıcable grant cash (book, FMV, appraisal, or assistance or government other) assistance 68-0633254 501 (C)(3) 50.000 WATER ACCESS AND NATIONAL CAUCUS OF ENVIRONMENTAL CONSERVATION LEGISLATORS 1228 1/2 31ST ST NW STE 110

1228 1/2 31ST ST NW STE 110
WASHINGTON, DC 20007

NATIONAL GOVERNERS
ASSOCIATION CENTER FOR
BEST PRACTICES
444 NORTH CAPITOL ST STE
267

WATER ACCESS AND
CONSERVATION

WATER ACCESS AND
CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 53-0204616 501 (C)(3) 50.000 NATIONAL WILDLIFE WATER ACCESS AND FEDERATION CONSERVATION 11100 WILDLIFE CENTER

DRIVE RESTON, VA 20190 280,000 NATURAL RESOURCES 13-2654926 501 (C)(3) DEFENSE COUNCIL INC.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WATER ACCESS AND CONSERVATION 40 WEST 20TH STREET 11TH FLOOR NEW YORK, NY 10011

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501 (C)(3) 20.000 IWATER ACCESS AND PACIFIC INSTITUTE FOR 94-3050434 STUDIES IN DEVELOPMT CONSERVATION 654 13TH STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

13520 VAN NUYS BLVD 200

PACOIMA, CA 91331

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 95-3956136 501 (C)(3) 76.000 WATER ACCESS AND PHYSICIANS FOR SOCIAL RESPONSIBILITY-LOS CONSERVATION ANGELES. 617 S OLIVE

WATER ACCESS AND

CONSERVATION

40,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

LOS ANGELES, CA 90014

1438 WEBSTER ST 303

OAKLAND, CA 94612

94-3297479

POLICY LINK

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 95-3213958 501 (C)(3) 50.000 WATER ACCESS AND PROYECTO PASTORAL 135 N MISSION PD CONSERVATION

LOS ANGELES, CA 90033					CONSERVATION
PUBLIC POLICY INSTITUTE OF CALIFORNIA 500 WASHINGTON STREET STE 600	94-3207299	501 (C)(3)	35,000		WATER ACCESS AND CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN FRANCISCO, CA 94111

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance REGENTS OF THE UNIVERSITY 94-6002123 501 (C)(3) 334.994 WATER ACCESS AND OF CALIFORNIA CONSERVATION 2195 HEARST AVENUE ROOM

WATER ACCESS AND

CONSERVATION

130F BERKELEY, CA 94720

64,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

RESOURCE MEDIA

BEAVERTON, OR 97008

9450 SW GEMINI DRIVE 59115

82-0564961

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance WATER ACCESS AND CONSERVATION

WATER ACCESS AND

100,000

RIVER NETWORK	93-0969979	501 (C)(3)	20,000		
PO BOX 21387			·		
BOULDER, CO 80308					
1					

501 (C)(3)

94-3302335

RIVER PARTNERS

580 VALLOMBROSA AVE CHICO, CA 95926

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501 (C)(3) 60.000 RIVERKEEPER 11-3204621 WATER ACCESS AND 20 SECOR RD CONSERVATION

OSSINING, NY 10526

ROCKEFELLER PHILANTHROPY 13-3615533 501 (C)(3) 30,000

ADVISORS INC 6 WEST 48TH ST 10TH FLOOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 95-3528437 170 (C)(1) 85.000 ROSEDALE-RIO BRAVO WATER WATER ACCESS AND STORAGE DISTRICT CONSERVATION

SAFE CLEAN WATER FOR LA COUNTY YES ON MEASURE W

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

13636 VENTURA BLVD 416 SHERMAN OAKS, CA 91423

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 33-0647946 501 (C)(3) 25,000 WATER ACCESS AND SAN DIEGO COASTKEEPER

2825 DEWEY RD 207 CONSERVATION SAN DIEGO, CA 92106

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OAKLAND, CA 94612

SAVE THE BAY 94-6078420 501 (C)(3) 50,000 WATER ACCESS AND 1330 BROADWAY STE 1800 ICONSERVATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SILICON VALLEY LEADERSHIP 94-2460352 501 (C)(6) 50.000 WATER ACCESS AND

GROUP 2001 GATEWAY PLACE 101E SAN JOSE, CA 95110					CONSERVATION
SUSTAINABLE CONSERVATION 98 BATTERY STREET SUITE	94-3232437	501 (C)(3)	309,300		WATER ACCESS AND CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

302

SAN FRANCISCO, CA 94111

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 80-0551584 501 (C)(3) 35.000 WATER ACCESS AND TELELE FOUNDATION PO BOX 83 CONSERVATION GROVELAND, CA 95321

GROVELAND, CA 95321

TEMPLE UNIVERSITY OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION PO BOX 824242

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILADELPHIA, PA 19182

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 84-0399006 501 (C)(3) 25.000 THE ASPEN INSTITUTE INC WATER ACCESS AND 2300 N ST NW STE 700 CONSERVATION WASHINGTON, DC 20037 WATER ACCESS AND

WASHINGTON, DC 20037

THE BOARD OF TRUSTEES OF 94-1156365 501 (C)(3) 97,877

THE LELAND STANFORD JUNIOR UNIVERSITY STANFORD UNIVERSITY LOCKBOX PO BOX 44253

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN FRANCISCO, CA 94144

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 94-0399260 501 (C)(3) 30.000 IWATER ACCESS AND THE COMMONWEALTH CLUB OF CALIFORNIA CONSERVATION

110 THE EMBARCADERO SAN FRANCISCO, CA 94105

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MILL VALLEY, CA 94941

THE FARTH GENOME 47-2935807 501 (C)(3) 50.000 WATER ACCESS AND PO BOX 1337 CONSERVATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501 (C)(3) 150.000 THE FRESHWATER TRUST 93-0843521 WATER ACCESS AND

700 SW TAYLOR ST STE 200 CONSERVATION PORTLAND, OR 97205 53-0242652 501 (C)(3) 200,000 WATER ACCESS AND THE NATURE CONSERVANCY 555 CAPITOL MALL SUITE LCONSERVATION

1290 SACRAMENTO, CA 95814

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance 95-6006143 501 (C)(3) 70.000 WATER ACCESS AND THE REGENTS OF THE UNIVERSITY OF CALIFORNIA CONSERVATION PO BOX 957089 1125 MURPHY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1250

OAKLAND, CA 94612

HALL 405 HILGRAD AVE LOS ANGELES, CA 90095						
THE SIERRA CLUB FOUNDATION 2101 WEBSTER STREET SUITE	94-6069890	501 (C)(3)	30,000		I .	WATER ACCESS AND CONSERVATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ACCESS AND

TREEPEOPLE INC	23-7314838	501 (C)(3)	120,000		WATER AC
12601 MULHOLLAND DRIVE					CONSERV
BEVERLY HILLS, CA 90210					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4221 HOLLIS STREET EMERYVILLE, CA 94608

VATION TROUT UNLIMITED 38-1612715 501 (C)(3) 300,000 WATER ACCESS AND

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance TRUST FOR CONSERVATION 91-2166435 501 (C)(3) 62.090 WATER ACCESS AND TION

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405 14TH STREET STE 164 OAKLAND, CA 94612				
INNOVATION				CONSERVAT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

829 13TH ST

MODESTO, CA 95354

TUOLUMNE RIVER TRUST 80.000 94-2834151 501 (C)(3) IWATER ACCESS AND

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-2112661 501 (C)(3) 40.000 WATER ACCESS AND US WATER ALLIANCE 1970 BROADWAY STE 950 CONSERVATION OAKLAND, CA 94612 WATER ACCESS AND

OAKLAND, CA 94612

UNIVERSITY OF VERMONT 03-0179440 501 (C)(3) 74,914

WATER ACCESS CONSERVATION SOUTH
PROSPECT STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BURLINGTON, VT 05405

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 84-1113831 501 (C)(3) 50.000 WATER ACCESS AND WESTERN RESOURCE ADVOCATES CONSERVATION 2260 BASELINE RD STE 200

WATER ACCESS AND

CONSERVATION

340.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170 (C)(1)

2260 BASELINE RD STE 20 BOULDER, CO 80302 WESTERN STATES WATER

COUNCIL

682 E VINE ST 7 MURRAY, UT 84107 93-0551574

Compensation Information	efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed Data -		DLN: 934	9330	8025	579
Part I Questions Regarding Compensation Attach to Form 990. Beginner at Reme Serve Attach to Form 990. Att It I	Sch	edule J	Compensation	Information	ОМ	B No	1545-0)047
Attach to Form 990,	(Form 990)		For certain Officers, Directors, Truste					
Attach to Form 990,			Compensated E	2018				
Image: A comparation		▶ Attach to Form 990.						
Part Questions Regarding Compensation	•		► Go to <u>www.irs.gov/Form990</u> for Instr	ructions and the latest inforn	nation.			
Questions Regarding Compensation Yes No			tion		Employer identificat			
Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items 990, Part VII, Section A, line 1a, did the organization follow a written policy regarding payment or remiburisement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1b III any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or remiburisement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1b III directions, including the CEO/Executive Director, but explain 1c III directions, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization or compensation or committee 1c III organization or compensation or survey or study 1c III organization or a related organization to establish compensation of the CEO/Executive Director, but explain in Part III 1c Explain 1c III 1c II	WAI	ER FOUNDATION			37-1833985			
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	Pa	rt I Questi	ons Regarding Compensation	<u>'</u>				
September Sept							Yes	No
Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef)	1a							
Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		First-class	or charter travel Hous	sing allowance or residence for p	personal use			
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of the organization is CEO/Executive Director. Check all that apoly. Do not check any boxes for methods used by a related organization to establish compensation used to establish the compensation of the organization is CEO/Executive Director, but explain in Part III Compensation committee		_	· ·	'				
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization to establish compensation of the organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee								
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used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee	3				e			
Independent compensation consultant		_		•	n Part III			
Independent compensation consultant				•				
Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? Receive a severance payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Approval by the board or compensation on the payment from, an equity-based compensation contingent on the net earnings of Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? A The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 3 and 6? If "Yes," describe in Part III The organization of the net earnings of the payments not described in lines 3 and 6? If "Yes," describe in Part III Rever any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III By the payments of the payment in				• •				
During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Ponly 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III Propersons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III Received Propersons listed on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III Received Propersons listed on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III Propersons listed on Form 990, Part VII, Page of the part Properson Part III Properson line		_ '		· · · · · · · · · · · · · · · · · · ·	tion committee			
related organization Receive a severance payment or change-of-control payment? A Receive a severance payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of A The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6° 1f "Yes," describe in Part III For persons listed on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III Rever any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III Rever any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-6(c)?								
A Receive a severance payment or change-of-control payment? B Participate in, or receive payment from, a supplemental nonqualified retirement plan? C Participate in, or receive payment from, an equity-based compensation arrangement? D Participate in, or receive payment from, an equity-based compensation arrangement? Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Any related organization? The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of Were any amounts reported on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III B No For Persons listed on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-6(c)? For Person I line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	4			A, line 1a, with respect to the fil	ling organization or a			
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Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Any related organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III First on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	c					4c		
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For Bourseast, Budgetter Act Metter and the Frederic Mark For For Account 1987 Control Control								

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Instructions, on row (II) Do not list any individuals that are not listed on Form 990, Part VII.

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

Note. The sum of column	s (B)	(ı)-(ııı) for each listed inc	dividual must equal the to	tal amount of Form 990,	Part VII, Section A, line .	1a, applicable column (D)	and (E) amounts for that	t ındıvıdual
(A) Name and Title			of W-2 and/or 1099-MISC	· · · · · · · · · · · · · · · · · · ·	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				column (B) reported as deferred on prior Form 990
1 WADE CROWFOOT CEO	(i)	293,805	0	0	21,425	19,833	335,063	0
	(ii)	0	0	0	0	0	0	0
2 LIZETTE LECLERC DIRECTOR OF FINANCE AND	(i)	174,583	0	0	13,494	6,746	194,823	0
OPERATIONS	(ii)	0	0	0	0	0	0	0
3 JENNIFER SOKOLOVE DIRECTOR OF PROGRAMS	(i)	169,549	0	0	10,559	18,276	198,384	0
AND STRATEGY	(ii)	0	0	0	0	0	0	0
4 ANDREW FAHLUND SENIOR PROGRAM OFFICER	(i)	159,700	0	0	13,100	22,181	194,981	0
	(ii)	0	0	0	0	0	0	0
5 DOUGLAS MICHAEL MYATT	(i)	127,688	0	0	10,182	12,952	150,822	0
PROGRAM OFFICER	(ii)	0	0	0	0	0	0	0
6 ELIZABETH SODERSTROM STRATEGIC PARTNERSHIPS	(i)	133,738	0	0	10,145	7,874	151,757	0
OFFICER	(ii)	0	0	0	0	0	0	0
7 ALEXANDRA PAXTON PROGRAM OFFICER	(i)	138,503	0	0	11,235	10,522	160,260	0
	(ii)	0	0	0	0	0	0	0
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							Schedule	J (Form 990) 2018

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

efile GRAPH	IC print - DO	NOT PROCESS	As Filed Data -		DLN:	93493308025579	
SCHEDULE O (Form 990 or 990- EZ) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.qov/Form990 for the latest information.					ions on on.	2018 Open to Public Inspection	
Name Bethe of g Water Foundatio 990 Schedule	ON	ental Informatio	n		Employer ident 37-1833985	fication number	
Return Reference				Explanation			
FORM 990, PART VI, SECTION B, LINE 11B	SUBMISSION	TO THE IRS ANY S	IGNIFICANT FINDING	HE WATER FOUNDATION'S A S ARE DISCUSSED WITH THI ORM 990 BEFORE THE FILING	FULL BOARD T		

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	WATER FOUNDATION'S (WF)CONFLICT OF INTEREST POLICY PROCEDURES 1 ANNUAL DISTRIBUTION OF THE POLICY AND DISCLOSURES IS FURNISHED ANNUALLY TO ALL INCUMBENT AND INCOMING DIRECTORS AND DOFFICERS EACH DIRECTOR AND OFFICERS SACH DIRECTOR AND OFFICERS SACH DIRECTOR AND OFFICERS SACH DIRECTOR AND OFFICERS SACH DIRECTOR AND OFFICER SHALL FILE A STATEMENT THAT AFFIRMS THAT HE OR SHE HAS RECEIVED A COPY OF THE POLICY, HAS READ AND UNDERSTANDS THE POLICY, AND HAS AG REED TO COMPLY WITH THIS POLICY EACH YEAR EACH DIRECTOR AND OFFICER SHALL FILE A STATEMEN T WITH THE BOARD OF DIRECTORS THAT LISTS (1) ANY OUTSIDE EMPLOYMENT OR CONSULTING WORK TH AT COULD CONSTITUTE A CONFLICT, AND (2) ANY BOARD MEMBERSHIP OR AFFILIATION WITH OTHER ORG ANIZATIONS THAT COULD CONSTITUTE A CONFLICT EACH DIRECTOR AND OFFICER MUST ALSO LIST HIS OR HER INVESTMENTS IN ANY CORPORATION, PARTNERSHIP, TRUST OR FUND IN WHICH HE OR SHE, TOGE THER WITH MEMBERS OF HIS OR HER FAMILY, HAS DIRECTLY OR INDIRECTLY A GREATER THAN 35% OWNE RSHIP INTEREST, REGARDLESS OF WHETHER SUCH INVESTMENTS COULD CONSTITUE A CONFLICT 2 DISC LOSURE OF ALL CONFLICTS AND POTENTIAL CONFLICT INCLUDING ALL MATERIAL FACTS CONCERNING ANY SITUATION THAT MIGHT BE VIEWED AS A CONFLICT SHALL BE DISCLOSED TO THE BOARD OF DIRECTORS BY THE DIRECTOR OR OFFICER CONCERNED 3 PROCEDURES NECESSARY TO APPROVE ANY CONFLICT NO DIRECTOR OF OFFICER MAY BE PRESENT FOR A VOTE BY THE BOARD OF DIRECTORS ON ANY DECISION O RACTION BY WATER FOUNDATION FOR WHICH THE BOARD OF DIRECTORS AND DIRECTORS HAS DETERMINED THAT THE DIRECTOR OR OFFICER HAS A FINANCIAL OR NON-FINANCIAL CONFLICT OF INTEREST 4 ADDITIONAL PROCED URES NECESSARY TO APPROVE A CONFLICT INVOLVING A MATERIAL FINANCIAL INTEREST THE BOARD OF DIRECTORS HAS DETERMINED THAT THE DIRECTOR OR OFFICER OF WE HAS A CONFLICT OR DAY TRANSACTION TO WHICH THE WATER FOUNDATION WOULD BE A PART Y AND IN WHICH THE BOARD OF DIRECTORS HAS DECIFICALLY AND IN GOOD FAITH DETERMINED THAT ADDIRECTOR OR OFFICER OF WE HAS A CONFLICT OR ADDITION OF ALL MATERIAL FINANCIAL INTERES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE SALARY OR OTHER COMPENSATION OF THE CEO [AND CHIEF FINANCIAL OFFICER] OF THE CORPORATI ON AND THE MANNER AND TIME OF THE PAYMENT THEREOF SHALL BE FIXED AND DETERMINED BY THE BOA RD OF DIRECTORS THE BOARD OF DIRECTORS SHALL REVIEW THE COMPENSATION PACKAGES, INCLUDING ALL BENEFITS, OF THE CEO [AND CHIEF FINANCIAL OFFICER] OF THE CORPORATION, AND SHALL APPRO VE SUCH COMPENSATION ONLY AFTER DETERMINING THAT THE COMPENSATION IS JUST AND REASONABLE THIS REVIEW AND APPROVAL SHALL OCCUR WHEN EACH SUCH OFFICER IS HIRED, WHEN THE TERM OF EMP LOYMENT OF SUCH OFFICER IS RENEWED OR EXTENDED, AND WHEN THE COMPENSATION OF SUCH OFFICE IS MODIFIED, UNLESS THE MODIFICATION APPLIES TO SUBSTANTIALLY ALL OF THE EMPLOYEES OF THIS CORPORATION DIRECTORS, OFFICERS, AND MEMBERS OF COMMITTEES SHALL NOT BE ENTITLED TO COMPE NSATION FOR THEIR SERVICES AS SUCH, ALTHOUGH THE BOARD OF DIRECTORS MAY AUTHORIZE, BY RESO LUTION, THE ADVANCE OR REIMBURSEMENT TO A DIRECTOR OF REASONABLE AND ACTUAL EXPENSES INCUR RED AS A DIRECTOR, SUCH AS FOR ATTENDING MEETINGS OF THE BOARD AND BOARD COMMITTEES

Return

PART VI.

Reference FORM 990. ANY AUDITED FINANCIAL STATEMENTS OBTAINED BY THIS CORPORATION SHALL BE MADE AVAILABLE FOR INSPECTION BY THE ATTORNEY GENERAL AND THE GENERAL PUBLIC WITHIN NINE MONTHS AFTER THE CLO

Explanation

SECTION C. SE OF THE FISCAL YEAR TO WHICH THE STATEMENTS RELATE. AND SHALL REMAIN AVAILABLE FOR THREE LINE 19 YEARS (1) BY MAKING THEM AVAILABLE AT THIS CORPORATION'S PRINCIPAL. REGIONAL. AND DISTRIC T OFFICES DURING REGULAR BUSINESS HOURS AND (2) EITHER BY MAILING A COPY TO ANY PERSON WHO SO REQUESTS IN PERSON OR IN WRITING OR BY POSTING THEM ON THIS CORPORATION'S WEBSITE

Return

Reference

Reference	
FORM 990, PART IX, LINE 11G	HR PEO SERVICES AND TECH PROGRAM SERVICE EXPENSES 24,102 MANAGEMENT AND GENERAL EXPENSES 15,173 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 39,275 PROFESSIONAL SERVICES - OTHER PRO GRAM SERVICE EXPENSES 2,517 MANAGEMENT AND GENERAL EXPENSES 1,776 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4,293 RECRUITMENT PROGRAM SERVICE EXPENSES 61,898 MANAGEMENT AND GENER AL EXPENSES 37,875 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 99,773 WEBSITE UPDATE AND MAIN TENANCE PROGRAM SERVICE EXPENSES 475 MANAGEMENT AND GENERAL EXPENSES 380 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 855 CONSULTING PROGRAM SERVICE EXPENSES 1,415,876 MANAGEMENT AND GENERAL EXPENSES 42,385 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,458,261 EVENT SERVICE EXPENSES 1,458,261 EVENT SERVICE EXPENSES 1,458,261 EVENT SERVICE S PROGRAM SERVICE EXPENSES 89,123 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 89,123

Explanation