Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

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

Ā	For the	e 2013 cale	endar year, or tax year beginning July 1 , 2013, and end	ing Ju	ne 30	, 20 14			
В	Check if	f applicable:	C Name of organization		D Employ	er identification number			
	Address	s change	Doing Business As Water for Humans		26-1557382				
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite	E Telepho	ne number			
V	Initial re	eturn	13714 37th Avenue NE			206-452-3503			
	Termina		City or town, state or province, country, and ZIP or foreign postal code						
$\overline{\Box}$		ed return	Seattle, WA 98125		G Gross n	eceipts \$ 47,152			
$\overline{\Box}$		tion pending		H(a) is this a	omum return for	subordinates? Yes V No			
_	, 4- pc		Rick McKenney; 13714 37th Ave NE; Seattle, WA 98125	1 ''		s included? Yes No			
_	Tax-exe	empt status:				a list. (see instructions)			
<u>:</u>	Website		w.waterforhumans.org	H(c) Grou	p exemption	number >			
K			✓ Corporation Trust Association Other ► L Year of form			of legal domicile: WA			
P	art I	Summ		2000	, •	•••			
	1		escribe the organization's mission or most significant activities: Water	r for Humans	' mission i	is to provide low-cost.			
φ	1 -	•	ter and sanitation solutions to underserved populations while ensuring the						
Activities & Governance		Cicali Wa	ter and same and solutions to under served populations write ensuring the	iat water Tellia	1115 0 1000	ii, public resource.			
Ě	2	Check th	is box ▶☐ if the organization discontinued its operations or disposed	of more tha	n 25% of	ite not accete			
Š	3				1 -	l locasses.			
<u>ن</u>	4		of independent voting members of the governing body (Part VI, line 1)		-	<u> </u>			
88	5			•	. 5				
ŧ	٦				. 6				
5	70				. 7a	1			
•	7a		elated business revenue from Part VIII, column (C), line 12		. 7a				
	Ь	Net unre	lated business taxable income from Form 990-1, line 34	Prior \		Current Year			
		Cambrilla	tions and awarts (Dort VIII. line 4 b)						
身	8		tions and grants (Part VIII, line 1h)	<u></u>	4,391.	47,15			
Revenue	9	_	service revenue (Part VIII, line 2g)	<u> </u>	6,229.				
æ	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)		0				
	11		venue (Part VIII- column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0				
	12		enue add lines 8 through 1 (must equal Part VIII, column (A), line 12)	 	10,620.	47,15			
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		0	 			
	14		fald to 6) for members (Part IX, column (A), line 4)		0				
88	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		662.	7,50			
2	16a		onal fundraising fees (Part X, column (A), line 11e)		0				
Expenses	_b		draising expenses (Part IX, column (D), line 25)		 				
-	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	9,829.	29,99			
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		10,491.	37,50			
	19	Revenue	less expenses. Subtract line 18 from line 12	 	129.	9,65			
5				Beginning of C		End of Year			
ssets aden	20		sets (Part X, line 16)		595.	10,24			
Net Ass	21		pilities (Part X, line 26)		0	٠,			
			ets or fund balances. Subtract line 21 from line 20	1	595.	10,24			
P	art II	Signa	ture Block						
			ary, I declare that I have examined this return, including accompanying schedules and sta			my knowledge and belief, it			
	Je, Correc	ct, and comp	Nete. Declaration of preparer (other than officer) is based on all information of which preparer	rer has any know	wiedge.	· . · . · · · · · · · · · · · · · · · ·			
			Stanton H. Brown, In.		11	11712014			
Si	_	1,	nature of officer)ate				
He	ere	3	TA LTON H. BROWN, Jn.						
_		Тур	e or print name and title						
P	aid	Print/Ty	pe preparer's name Preparer's signature						
	epare	er L							
	se On	1 — .	name 🕨						
U :	o c Ull	ייש עיי	address ▶						
Ma	y the I		s this return with the preparer shown above? (s						

For Paperwork Reduction Act Notice, see the separate instructions.

1 is the organization described in section 501(s)(3) or 4947(s)(1) (other than a private foundation)? If "Yes," complete Schedule B, Schedule of Contributors (see instructions)? 2 is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization again indirect or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(s)(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 II 5 is the organization assection 501(c)(4), 501(c)(5), or 501(c)(5) or 501(c)(6) part II II. 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 III 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV. 10 Did the organization orgont an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, in Part X, line 2, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for investments—chore 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 V. 10 Did the organization report an amount for investments—chore 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 V. 1	Part I	V Checklist of Required Schedules			
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Pes," complete Schedule C, Part I assessments of the property of the				Yes	No
2 is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization ragge in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "rise," complete Schedule C, Part I. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "rise," complete Schedule C, Part II. 5 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6), or 501(c)(7),	1	* ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
3 Did the organization engage in direct or indirect Dolltical campaign activities on behalf of or in opposition to candidates for public office? If Yes, "complete Schedule C, Part I I I election in effect during the tax year? If Yes," complete Schedule C, Part I II I Is the organization a section 501(h), 501(c)(h), 501(c)(h), or 501(c)(h), or 501(c)(h) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II II I I I I I I I I I I I I I I I I		·		_	
4 Section S01(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II . 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 96-197 If "Yes," complete Schedule C, Part III . 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 II . 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II . 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, corported credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . 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 V VI, VIII, IX, or X as applicable. a Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X V VIII . b) Did the organization report an amount for investments—other securities in Part X, line 11 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part X V VIII . b) Did the organization report an amount for other insbitties in Part X, line 15 that is 5% or more of its total assests reported in P			2	✓	<u> </u>
4 Section 501(c)3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II 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 92-19? If "Yes," complete Schedule C, Part III 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 II 10 Did the organization services P or historic structures? If "Yes," complete Schedule D, Part II 10 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, in 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 10 part IV. 10 Did the organization services? If "Yes," complete Schedule D, Part V II If the organization server tax or the following questions is "Yes," then complete Schedule D, Part X II I	3				,
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complete Schedule D, Part III 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, ordebt negotiation services? If "Yes," complete Schedule D, Part IV 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 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V II, IVII, IV, IX, or Xa spplicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II. 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 V II. c 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 V III. d Did the organization report an amount for other assets in Part X, line 15 If "Yes," complete Schedule D, Part X II. e Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X II. 12a Did the organization balan separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III. b Was the organization asserted "No" to line 12a, then completing Schedule financial statements for the tax year? If "Yes," and if the organization as achool described in section 170(b)(1)(A)(i)(P) If "Yes," complete Schedule E. 13	_		7		✓
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fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		•			7
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III. 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. 20 a Lif "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			ļ]	
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		·	14b	<u> </u>	✓
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15				١,
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	40		15	-	/
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	10		16		1
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	·	10	\vdash	
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			17	}	1
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		1	
If "Yes," complete Schedule G, Part III		Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u>L</u>	1
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19				
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . 20b		·		<u> </u>	1
			_	_	/
Enam WALL F		ir "Yes" to line zua, did the organization attach a copy of its audited financial statements to this return? .			2012

Form 99			F	Page 4
Part	V Checklist of Required Schedules (continued)		V	•
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	No ✓
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	_	✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a		24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	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 so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	1	1
		For	m 99 0	2013)

Check f Schedule O contains a response or note to any line in this Part V Tell Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Line of the number of Forms W-2G included in line 1a. Enter -0- if not applicable De Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable De Check of Schedule O Check of Schedule		0 (2013)			Page 4
The Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 to 1 t	Part				·
16 Enter the number reported in Box 3 of Form 1096. Enter -0-if not applicable 16 Enter the number of Forms W-26 included in line 1a. Enter -0-if not applicable 16 Did the organization comply with backup withholding rules for reportable payments to to vendors and reportable garning (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2		Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
b Enter the number of Forms W-2G included in line 1a. Enter 0- if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) winnings to prize winners? Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year ending with or within the year covered by this return Nette. If the sum of times 1 and 2a is greater than 250, you may be required to o-file (see instructions) Bit if year, has it filed a Form 990-T for this year? If the organization have an interest in, or a signature or other authority over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, a filancial account in a foreign country; Part over, and account, securities account, and accounts account, and accounts account, and accounts account, and accounts account ac				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners?	_		1		
reportable gaming (gambling) winnings to prize winners? 2	-		ļ		
Statements, filed for the calendar year ending with or within the year covered by this return 2 b if at least one is reported on file 26, did the organization file all required deteral employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 1 if "Yes," has it filed a Form 990-Ti for this year? If "No" to line 3b, provide an explanation in Schedule 0. 3b If "Yes," an account; a summary of the foreign country; less as a bank account, securities account, or other financial account, and account; security of the organization and party to a prohibited tax shater transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shater transaction at any time during the tax year? 5d If "Yes," enter the name of the foreign country; less as bank account, securities account, or other financial accounts; or if "yes" to line 5a or 5b, did the organization file Form 8888-T? 5a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible account to the grood or services provided to the payor? 7 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization stat may receive a payment in excess of \$75 made party as a contribution of any and any account of the payor? 7 Organization state may receive deductible account of the organization received as contribution of organization and party to proper the payor. 7 If "Yes," did the organization neceive any funds, directly or indirectly, to pay premiums, of the	C		1c	1	
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Note. If the sum of lines 1a and 2e is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unretated business gross income of \$1,000 or more during the year? 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, or other financial account). 5 If "Yes," enter the name of the foreign country: ▶ 8 See instructions for filing requirements for Form TD F 80-22.1, Report of Foreign Bank and Financial Accounts. 8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 If "Yes," to line 5 aor 5b, did the organization file Form 8886-17? 8 Does the organization solicit any contributions that were not tax deductible as charitable contributions? 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organization start greate eductible contributions under section 170(c). 10 Id the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 10 If "Yes," did the organization notify the donor of the value of the goods or services provided? 10 Id the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 10 If "Yes," indicate the number of Forms 8282 filed during the year 10 Id the organization received a contribution of qualified intellegular property, did the organization file Form 8293 are required? 11 If "Yes," indicate the number of Forms 8282 filed during the year 12 If the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 12 If the organization organization self-and contributions under section 4966? 13 Sponsoring organizations maintaining donor advised funds and section 500(e)(8)					
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c if "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization is sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f If the organization received a contribution of cars, bosts, simplanes, or other vehicles, did the organization? f If the organizations benefit contract? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? The section 501(c)(27) organizations. Enter: Gross income from members or shareholders. Initiation fees and capital contributions included on Part VIII, line 12 Gross income from members or shareholders. In the organization have a distributions included on Part VIII, line 12 Section 501(c)(29 qualified nonproff health insurance issuers. Is the organization licensed to issue qualified health plans in	b				
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14a Did the organization receive any payments for indoor tanning services during the tax year?	c	100	1		
			14a	 	1
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Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
	Check if Schedule O contains a response or note to any line in this Part VI				
Section	on A. Governing Body and Management				
_	The state of the second of the second of the end of the tay year	10 -		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or	1a 7			1
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.			i	
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?	elationship with			
3	Did the organization delegate control over management duties customarily performed by or	under the direct	2		-
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 99		4		✓
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		✓
6 7a	Did the organization have members or stockholders?	elect or appoint	6		/
/ a	one or more members of the governing body?	····	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval	by) members,			
	stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions un	dertaken during			
	the year by the following:				
a	The governing body?		8a 8b	✓	<u> </u>
9 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be said the solution of the governing body?		<u> </u>	<u>*</u>	
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		1
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue Co	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	fouch chanters	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities or affiliates, and branches to ensure their operations are consistent with the organization's exemple.		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	_	11a		✓
ь	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	e rise to conflicts?	12a 12b		-
b	Did the organization regularly and consistently monitor and enforce compliance with the		120	V	
•	describe in Schedule O how this was done		12c	1	
13	Did the organization have a written whistleblower policy?		13	1	
14	Did the organization have a written document retention and destruction policy?		14	✓	
15	Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a		1
b	Other officers or key employees of the organization		15b		1
40-	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 similarity during the year?		16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps	o safeguard the			
Conti	organization's exempt status with respect to such arrangements?		16b	L	
Secti	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ wa				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T (Section	n 501	c)(3)s	contv)
	available for public inspection. Indicate how you made these available. Check all that apply.			-,(-,	···y)
	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Sc				
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume		erest	polic	y, and
~~	financial statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the b		of the	•	
	organization: ► Rick McKenney, Water for Humans, 13714 37th Ave NE, Seattle, WA 98125 - (208	s) 465-5860			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization no	any relate	d orga	anız	atio	n co	ompe	nsa	ted any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	office office or direct	unles	s pe	tion more	than of the transfer of the tr	ee) Form	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Charlie Cunniff, Board, Chairperson	3	·	"			8.		0	0	0
(2) April Atwood, Board	11	1						0		. 0
(3) Susan Bolton, Board	1	1							0	0
(4) Hector Saez, Board	1	1						0		0
(5) Tressie Word, Board	11	1		,				0		0
(6) Rick McKenney, Board, Executive Director	40	1		1				3,500.	0	0
(7) Stan Brown, Board, Chief Operating Officer	40	1		1				3,500.	0	0
(8)										
(9)										
(10)										
(11)										
(12)		-								
(13)										
(14)		1		Γ						

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	ot ch unles	s pe	rtion more	the both Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	n from amount of other compensation		on n	
(15)							- 1			<u>\</u>	1	· <u>.</u>		
(16)														
(17)					_						-	= '		<u>-</u> -
(18)					_						-			
(19)						-					+			
(20)											-			
(21)											+			
(22)						 								
(23)						<u> </u>								 -
(24)						<u> </u>		-					 -	
(25)					-			-			-	 		
1b c d	Sub-total				· ·		- - -	A A A	7,000. 0 7,000.		0		Participan de la companya del companya del companya de la companya	0
2	Total number of individuals (including bureportable compensation from the organ	t not limited ization ► 0	to th	ose	list	ed	above	e) w	ho received m	ore than \$100,	000 o	f	3	
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	ployee, or high	est compense	ted	3	Yes	No /
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	000	? /:	"Ye	s, "	complete Sch			4		1
5	Did any person listed on line 1a receive of for services rendered to the organization	r accrue co	ompe	nsat	tion	fro	n any	un un	related organiz	ation or individ	lual	5	-	
	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.	compensat compe	ed ind nsatio	depe on fo	end or th	ent ne c	contr alend	acto ar y	ors that receive year ending wit	ed more than \$ h or within the	100,0 orgai	100 oʻ nizati	f on's t	ax
	(A) Name and business add	Iress							(B) Description of s	ervices	Çc	(C) empen	sation	
					_ - _									
2	Total number of independent contractor received more than \$100,000 of compensations.	ors (including	ng bu	ıt n	ot niza	lımit tion	ed to	tr	nose listed ab	ove) who				
				_								For	m 99 (0 (2013

Form **990** (2013)

		Check if Schedule O contains a response or no	te to any line in this (A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
	د	٦		function revenue	revenue	under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a		1,		,
Gra	ь	Membership dues 1b				
ts, (Am	С	Fundraising events 1c		1 7	} -	*,
	đ	Related organizations 1d		}		
ns,	θ	Government grants (contributions) 1e		m a s		
	f	All other contributions, gifts, grants,			• • •	
호호			152.	1	a -1. '√	,
d d	9	Noncash contributions included in lines 1a-1f: \$		-		
	h	Total. Add lines 1a-1f	47,152.	<u>, ''</u>	· ·	
ş		Business Co	ode		•	
94	2a			,		<u>-</u>
Œ	b				ļ-·	
5	C					
8	d					'
μĒ	8	All -AL	-			
Program Service Revenue	[All other program service revenue .	•	 	<u></u>	<u> </u>
<u></u>	<u>g</u> 3	Total. Add lines 2a-2f	- [1	,
	١	and other similar amounts)	- ,			
	4	Income from investment of tax-exempt bond proceeds		-		
	5	• • • •	'` 			
	"	Royalties	1	 	-	
	6a	Gross rents	•			, -
	ь	Less: rental expenses		1.		
	c	Rental income or (loss)				
	d	Net rental income or (loss)	•			'
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory	-]	
	ь	Less: cost or other basis			1	
		and sales expenses .	-] ,
	С	Gain or (loss)				,
	d	Net gain or (loss)	•			İ
_						
ng E	8a	Gross income from fundraising		,		
Š		events (not including \$				
Other Reve		of contributions reported on line 1c).		_		
Ē		See Part IV, line 18 a		ţ		ì
₹		Less: direct expenses b		}		
		Net income or (loss) from fundraising events	>			
	9a	Gross income from gaming activities.	_			1
		See Part IV, line 19 a			-	ļ
		Less: direct expenses b				
		Net income or (loss) from gaming activities	<u> </u>		ļ	
	10a	Gross sales of inventory, less returns and allowances a				
			{-			
	b	Less: cost of goods sold b Net income or (loss) from sales of inventory	· ·			
	С	Miscellaneous Revenue Business Co	<u> </u>	 	 	
	11a					
	b					
	C			 	 	
	d	All other revenue		 		
	e	Total. Add lines 11a–11d			 	
	12	Total revenue. See instructions	47.450	 	 	-

	90 (2013) Statement of Functional Expenses	·····	······································		Page 10
	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. A	Il other organization	s must complete colu	ımn (A).
	Check if Schedule O contains a respons				
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	-			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				-
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	6,77 0 .	6,094.	338.	338
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salanes and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	-			
9	Other employee benefits				
10	Payroll taxes	737.	663.	37.	37
11	Fees for services (non-employees):				
a	Management	940.	235.	470.	235
b	Legal L				
C	Accounting				
d	Lobbying				
0	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,019.	611.	204.	204
12	Advertising and promotion				
13	Office expenses	2,011.	1,609.	201.	201
14	Information technology	3,493.	2,794.	350.	349
15	Royalties	············			
16	Occupancy				····
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		· · · · · · · · · · · · · · · · · · ·		
19	Conferences, conventions, and meetings .				
20	Interest		· · · · · · · · · · · · · · · · · · ·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance			· · · · · · · · · · · · · · · · · · ·	
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.		,		. ~
_	· L				
a b	Professional Dues and Development Project: Tools, Materials, Workshops	8.061.	4,031.	2,015.	2,01
C	Davolanmant	8,768.	8,768.	0	2 424
d	Development	5,702.	1,710.	570.	3,422
8	All other expenses				
25	All other expenses Total functional expenses. Add lines 1 through 24e	27 504	20 545	4 105	6,80
	The state of the s	37,501.	26,515.	4,185.	0,80

26

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

6,801.

Total liabilities and net assets/fund balances

_	990 (20 art X	Balance Sheet			Page 11
		Check if Schedule O contains a response or note to any line in this Par	tX		
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	595.	1	10,246
	2	Savings and temporary cash investments		2	
ı	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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	
ıts	6	Loans and other receivables from other disqualified persons (as defined under 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		6	
Assets	7	Notes and loans receivable, net		7	· · · · · · · · · · · · · · · · · · ·
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	·····
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		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	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	595.	16	10,246
	17	Accounts payable and accrued expenses		17	
	18 19	Grants payable		18 19	· · · · · · · · · · · · · · · · · · ·
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
s	22	Loans and other payables to current and former officers, directors,		-	
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	······································	25	·
	26	Total liabilities. Add lines 17 through 25	. 0	26	
Seo		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
횰	27	Unrestricted net assets	595.	27	10.246
ä	28	Temporarily restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
8	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ě	33	Total net assets or fund balances	595.	 	10,246
_				-	

10,246.

10,246.

34

595.

orm 99((2013)			Pa	ge 12
Part	XI Reconciliation of Net Assets	· ·			
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4	7,152.
2	Total expenses (must equal Part IX, column (A), line 25)	2		3	7,501
3	Revenue less expenses. Subtract line 2 from line 1	3			9,651
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			595.
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		10	0.246
Part	XII Financial Statements and Reporting	<u> </u>			-/
	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: ☑ Cash ☐ Accrual ☐ Other				
-	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.	•			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were com				Ť
	reviewed on a separate basis, consolidated basis, or both:] [
	Separate basis Consolidated basis Both consolidated and separate basis		'		ĺ
b	Were the organization's financial statements audited by an independent accountant?		2b		1
_	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a			_
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	versiaht			ĺ
•	of the audit, review, or compilation of its financial statements and selection of an independent account	_	20		

If the organization changed either its oversight process or selection process during the tax year, explain in

3a

Form **990** (2013)

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.

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2013

OMB No 1545-0047

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

Open to Public Inspection

Name	of the organization						E	mployer id	lentificatio	n number	
Water	r for Humans									57382	
Par	t I Reason fo	or Public Char	rity Status (All orga	nizations	must c	omplete	this par	t.) See i	nstructio	ons.	
The c 1 2 3 4	☐ A church, conv ☐ A school descr ☐ A hospital or a ☐ A medical rese	rention of church ribed in section cooperative hos arch organizatio	tion because it is: (Fones, or association of 170(b)(1)(A)(ii). (Attacspital service organization operated in conjunction.	churches h Schedu ition desc	describe ule E.) cribed in s	ed in sec	tion 170(70(b)(1)(b)(1)(A)(i A)(iii).		(iii). Enter	the
5	☐ An organizatio	e, city, and state n operated for t (1)(A)(iv). (Comp	the benefit of a collect	ge or univ	versity ov	vned or	operated	by a go	vernmen	tal unit de	scribed in
6 7	☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8	A community t	rust described in	n section 170(b)(1)(A)	(vi). (Con	nplete Pa	rt II.)					
9	An organization receipts from support from	n that normally activities related gross investme	receives: (1) more that to its exempt function in the income and unrelater June 30, 1975. See	an 331/3% ions—sub lated bus	of its su oject to c siness tax	pport fro ertain ex cable inc	ceptions ome (les	s, and (2) ss sectio	no more	e than 331	/3% of its
10 11	An organization	on organized an	operated exclusively of operated exclusive licly supported organ describes the type of	ely for th	e benefit described	of, to p	perform to on 509(a	the funct i)(1) or se	ions of, ection 50	9(a)(2). Se	
e	other than fou or section 509	ndation manage (a)(2). ation received a	If c Type III that the organization ers and other than one a written determination	is not coi e or more	ntrolled depublicly	irectly or support	indirecthed organi	y by one izations o	or more described	l in section	d persons n 509(a)(1)
g	•	17, 2006, has tl	he organization accep			ontributio	n from a	ny of the	•		
		-	ndirectly controls, eitlody of the supported o		_		-		dın (iı) a	nd 11g(i)	Yes No
h	(iii) A 35% cor	trolled entity of	on described in (i) abo a person described in ion about the support	i) or (ii) a	above? .					11g(ii) 11g(iii)	
	Name of supported organization	ted (ii) EIN (iii) Type of organization (iv) Is (described on lines 1-9 in col.		(iv) is the o	(iv) Is the organization in col. (i) listed in your governing document? (v) Did you notify the organization is col (i) of your support?		nization in of your			(vii) Amount of monetar support	
			,,	Yes	No	Yes	No	Yes	No	1	
(A)											
(B)											
(C)											
(D)											
(E)											
				1			1				

Part	(Complete only if you checked th	e box on line	e 5, 7, or 8 of	Part I or if the	organization	failed to qua) Ilify under
Cast	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, pl	ease comple	te Part III.)	
	on A. Public Support dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and	(a) 2003	(5) 2010	(0) 2011	(u) 2012	(6) 2013	(i) Total
•	membership fees received. (Do not					į	
	include any "unusual grants.")			10,975.	10,620.	47,152.	68,747.
2	Tax revenues levied for the			10,575.	10,020.	47,132.	00,147.
	organization's benefit and either paid						
	to or expended on its behalf					ľ	
3	The value of services or facilities						
	furnished by a governmental unit to the			l i		ļ	
	organization without charge						
4	Total. Add lines 1 through 3			10,975.	10,620.	47,152.	68,747.
5	The portion of total contributions by] [İ		
	each person (other than a					İ	
	governmental unit or publicly			! !	ŀ	}	
	supported organization) included on			1			
	shown on line 11, column (f)				[
6	Public support. Subtract line 5 from line 4.			-			40,000.
	on B. Total Support	····	l	l1			28,747.
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4		(-/	10,975.	10,620.	47,152.	68,747.
8	Gross income from interest, dividends,			19,010,	10,020.	1,,102.	30,1411
	payments received on securities loans,			1			
	rents, royalties and income from similar				ł		
	sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or			1			
	loss from the sale of capital assets (Explain in Part IV.)					İ	
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	68,747.
13	First five years. If the Form 990 is for the	•	•				8,229.
	organization, check this box and stop her				-		
Secti	on C. Computation of Public Support		е				
14	Public support percentage for 2013 (line 6			1, column (f))	1	14	%
15	Public support percentage from 2012 Sch					15	%
16a	331/3% support test-2013. If the organiz						
	box and stop here. The organization quali						
b	331/3% support test—2012. If the organi	zation did no	t check a box	on line 13 or	16a, and line	15 is 331/3% c	
	check this box and stop here. The organia						. > 🗆
17a	10%-facts-and-circumstances test—20	13. If the orga	anization did no	ot check a box	on line 13, 16a	, or 16b, and li	ne 14 is
	10% or more, and if the organization mee	ets the "facts-	and-circumsta	nces" test, che	ck this box and	stop here. E	kplain in
	Part IV how the organization meets the "fa organization".			_		s a publicly su	
.	•					40547	. • 🗀
D	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizati	12. If the orga	anization did no	ot check a box	on line 13, 168	a, 160, or 17a,	and line
	Explain in Part IV how the organization me	un meets the ets the "fact	: lacis-and-cl	rcumstances") tances" test Th	iest, check thi ne organization	o uux anu sto Laualifiee ee e	p nere. publick
	supported organization						. ► □
18	Private foundation. If the organization did						
	instructions						. ▶ 🛚

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

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

	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part	11.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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			1		:	
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
_							
4							
	organization's benefit and either paid					1	
_	to or expended on its behalf	·					· · · · · · · ·
5	The value of services or facilities		ì		ļ		
	furnished by a governmental unit to the				ļ		
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
ь	Amounts included on lines 2 and 3		I				· == -
	received from other than disqualified]	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support		.		<u> </u>		 -
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	(4) 2000	(2, 23.3	(0, 20) .	(4, 1511	(0, 20.0	(1)
10a	Gross income from interest, dividends,						
100	payments received on securities loans, rents,	:		ļ			
	royalties and income from similar sources .	i		l	ļ		
h	Unrelated business taxable income (less				 	 	
В	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	·				·		
_	Add lines 10a and 10b						
11	Net income from unrelated business				1	}	
	activities not included in line 10b, whether						
	or not the business is regularly carried on		ļ			ļ	
12	Other income. Do not include gain or					İ	
	loss from the sale of capital assets						
	(Explain in Part IV.)					<u> </u>	
13	Total support. (Add lines 9, 10c, 11,				1		
	and 12.)		1	<u> </u>	1	<u> </u>	<u> </u>
14	First five years. If the Form 990 is for the	~			-		
	organization, check this box and stop he			<u></u>			•
<u>Secti</u>	on C. Computation of Public Suppo		·				
15	Public support percentage for 2013 (line		•				%
16	Public support percentage from 2012 Sc			<u> </u>		16	<u>%</u>
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2013	line 10c, colur	mn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2012						%
19a	a 331/3% support tests-2013. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line						
	17 is not more than 331/3%, check this box	and stop here	. The organizat	ion qualifies as	a publicly supp	orted organizat	ion . ▶ 🗌
b	331/3% support tests-2012. If the organiz						
	line 18 is not more than 331/3%, check this	box and stop I	here. The organ	nization qualifie	s as a publicly s	supported organ	nization 🕨 📋
20	Private foundation. If the organization d	id not check a	box on line 14	l, 19a, or 19b,	check this box	and see instru	

Schedule A (F	Form 990 or 990-EZ) 2013 Pa	age 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; ar Part III, line 12. Also complete this part for any additional information. (See instructions).	nd
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Water for Humans	26-1557382
Form 990, Part VI, 11b - The only reviewers of our Form 990 are the Executive Director and the Chief O	perating Officer. This is
Water for Humans' first Form 990. Up until now, we have always filed a Form 990-N (postcard) and we	re eligible to do the same
this year. We decided to file a full Form 990 this year, however, because we want to get familiar with t	he Form while we still do not have
much money to report. We anticipate that, in the future, we will be required to submit a full 990 Form.	When we do, we will be ready.
Form 990, Part VI, 12c - We require staff and Board members to report any potential conflict of interest	t. During every Board meeting,
we specifically ask each member if he/she has anything to report. During this tax year there were no is	ssues with respect to this matter.
Form 990, Part VI, 19 - Upon request we make our governing documents, conflict of interest policy and	financial satatements available to
the public.	
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Schedule O (Form 990 or 990-EZ) (2013)	Pa	age 2
Name of the organization	Employer identification number	
Water for Humans	26-1557382	
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