Corm 9990	generally cannot redact the information on the Information about Form 990 and its instructions is at <u>www.IRS.gov</u> calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31	e Code (exo de public B ¹ form 1/form990	e pt private y law, the I		2013 Open to Public
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For the 2013 Check if applicat Address change Name change	generally cannot redact the information on the Information about Form 990 and its instructions is at <u>www.IRS.gov</u> calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31 le C Name of organization Living Water International	form / <i>form990</i>			Open to Public
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Check ıf applıcal Address change Name change	le Living Water International		D Employ		
Name change				ver iden	tification number
	Doing business As		76-03	24875	
Initial return					
	Number and street (or P O box if mail is not delivered to street address) Room/suite 4001 Greenbriar Dr	e	E Telepho	ne numb	er
Terminated			(281)	207-78	300
Amended return Application pend	City or town, state or province, country, and ZIP or foreign postal code Stafford, TX 77477				
Аррисаціон рени	F Name and address of principal officer				27,429,297
	Michael Mantel		nis a group ordinates?	return i	r √Yes √No
	PO Box 2557 Sugar Land, TX 774872257	H(b) Are	all subordır	nates	└ Yes ✔ No
		inclu	uded?		
Tax-exempt sta	tus 🔽 501(c)(3) 🔽 501(c)() 🛋 (Insert no) 🔽 4947(a)(1) or 🔽 527	If"N	lo," attach	alıst (see instructions)
Website: 🕨	vww water cc	H(c) Gro	up exemptı	on num	ber 🕨
orm of organiza	ion 🔽 Corporation 🗍 Trust 🗍 Association 🗍 Other 🕨	L Year of f	ormation 199	90 M S	State of legal domicile
Part I Su	immary				
2 Chec		f more than 1		net ass	ets
	k this box 🏹 if the organization discontinued its operations or disposed of			net ass	ets
3 Numb	k this box I if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a)	f more than a	25% ofits	3	
3 Numb 4 Numb	k this box I if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b)	f more than i	25% ofits	· •	
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 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 	k this box F if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2013 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34	f more than :	25% of its or Year	3 4 5 6 7a 7b	2,3 Current Year
 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Col 		f more than :	25% of its	3 4 5 6 7a 7b 19	2,3 Current Year 24,047,6
 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Col 	k this box I if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2013 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34 ntributions and grants (Part VIII, line 1h)	f more than :	25% of its or Year 20,069,1 62,1	3 4 5 6 7a 7b 19 79	2,3 Current Year 24,047,6 283,8
3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv		f more than :	25% of its	3 4 5 6 7 4 7 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2,3 Current Year 24,047,6
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3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Coo 9 Pro 10 Inv 11 Oth 12 Total 13 Gra 14 Ben 15 Sal	A this box I if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2013 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nurelated business taxable income from Form 990-T, line 34 nurelated business taxable income from Form 990-T, line 34 estimate income (Part VIII, line 1h) intributions and grants (Part VIII, line 2g) estment income (Part VIII, column (A), lines 3, 4, and 7d) inter revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ints and similar amounts paid (Part IX, column (A), lines 1–3) uefits paid to or for members (Part IX, column (A), line 4)	f more than 3	25% of its or Year 20,069,1 62,1 141,1 -12,5 20,259,9	3 4 5 6 7a 7b 19 79 21 05 14	2,3 Current Year 24,047,6 283,8 628,5 -34,2 24,925,7
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3 Numb 4 Numb 5 Total 6 Total 7a Total 7a Total 7a Total 7a Total 7a Total 9 Pro 10 Inv 12 Tot 13 Gra 14 Ber 15 Sal 5- 16a 17 Oth 18 Total 19 Rev 20 Total	A this box I f the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2013 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 hrelated business taxable income from Form 990-T, line 34 nurbiated business taxable income from Form 990-T, line 34 estimate income (Part VIII, line 1h) gram service revenue (Part VIII, column (A), lines 3, 4, and 7d) her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ints and similar amounts paid (Part IX, column (A), lines 1–3) hefits paid to or for members (Part IX, column (A), line 4)	f more than 3	2 5% of its	3 4 5 6 7a 7b 19 79 21 05 14 87 84 77 63 77 63 95	2,3 Current Year 24,047,6 283,8 628,5 -34,2 24,925,7 10,580,8 5,444,4 7,695,4 23,720,7 1,204,9

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign Here									
Deid		Print/Type preparer's name Jody Blazek	Preparer's signature						
Paid Prepare	r	Firm's name 🕨 Blazek & Vetterling							
Use Onl		Fırm's address 🕨 2900 Weslayan Suite 200							
May the TD	- dia a								

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2013)			Page 2
Par	t IIII Statement of Program S Check if Schedule O contains a			
1	Briefly describe the organization's mis	sion		
	g Water International (LWI) exists to de erately needed clean water and to expe			oping countries to acquire
2	Did the organization undertake any sig the prior Form 990 or 990-EZ?		g the year which were not listed on	┌ Yes ┌ No
	If "Yes," describe these new services			
3	Did the organization cease conducting services?		how it conducts, any program	🔽 Yes 🔽 No
	If "Yes," describe these changes on S	chedule O		
4	Describe the organization's program so expenses Section 501(c)(3) and 501 the total expenses, and revenue, if any	(c)(4) organizations are require	d to report the amount of grants and	
4a	(Code) (Expenses \$	15,797,152 including gram	nts of \$ 10,343,668) (Revenue s	5 236,555)
	WATER PROJECTS LWI trains and equips stat construction of new bore holes, filtration syste basic health and hygiene education and sanita various methods including training in oral Bible most appropriate technology and socially resp	rms, rainwater harvesting as well as th ation systems when possible The gosp e story telling LWI empowers local indi	e rehabilitation of existing systems that hav el is shared through partnerships with local viduals, communities and economies when	e fallen into disrepair We introduce churches and other ministries using ever possible and seeks to use the
4b	(Code) (Expenses \$	3,414,608 including gram	nts of \$) (Revenue \$	47,333)
	TRAINING LWI trains hundreds of volunteers, use culturally appropriate storying techniques experience gained can be easily transferred M and hygiene, and sharing their faith Other pro	for Christian witness We use training t ISSION OUTREACH LWI leads hundred	techniques that equip participants to train ot ds of volunteers into the field each year to a	hers, so that the knowledge and
4c	(Code) (Expenses \$	ıncludıng gran	ts of \$) (Revenue \$)
4d	Other program services (Describe in (Expenses \$	Schedule O) Including grants of \$) (Revenue \$)
4e	Total program service expenses 🕨	19,211,760		
	······································	, ,. ••		Form 990 (2013)

Part IV Checklist of Required Schedules

Page	3
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 50	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
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 💁	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 🔁	11a	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
с	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	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 😨	12a		No
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	Yes	
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
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Yes	
15	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 😨	15	Yes	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part XV Checklist of Required Schedules (continued) 11 Did the organization proof more than 55.000 of grants or other assistance to any domestic organization proof more than 55.000 of grants or other assistance to any domestic organization proof. 21 Yes 20 Did the organization proof. 22 Ne 21 Did the organization proof. 23 Yes 23 23 Did the organization proof. Yes, 'complete Schedule / Arts 1 and 111 Ne 24 Ne 24 Did the organization have a tax-exampt bond issue with an outstanding procipal amount of more than \$100.000 24 No 24 Did the organization invexe at tax-exampt bond issue with an outstanding procipal amount of more than \$100.000 24 No 24 Did the organization invexe at tax-exampt bond issue with an outstanding escrow at any time during the year? 240 No 25 Section \$01(c)(3) and \$01(c)(4) organizations. Did the organization organization invexes that the transaction with a signalified person in a proof and any or the organization invexes that the transaction apport of any or the organization invexes that the transaction with a signalified person in a proof and any or the organization invexes any tax-exampt bond? 26 No 25 Section \$01(c)(3) and \$01(c)(4) organization engose in an excess	Form	990 (2013)			Page 4
gevernment en Part X, column (A), line 17 /1 Yes, complete Schedule I, Parts I and II 1	Par	t IV Checklist of Required Schedules (continued)			
Part IX, column (A), Inne 2? If 'Yes,' complete Schedule I, Parts I and III . Image: Column (A), Inne 2? If 'Yes,' complete Schedule I, Parts I and III . Image: Column (A), Inne 2? If 'Yes,' complete Schedule I, Parts I and III . Image: Column (A), Inne 2? If 'Yes,' complete Schedule I, Parts I and III . Image: Column (A), Inne 2? If 'Yes,' complete Schedule I, Part II and III . Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2? If 'Yes,' Complete Schedule A Image: Column (A), Inne 2. Inne 2. Inne 2. Inne 2. Inne 2. Inne Inne 2. Inne 2. Inne 2. Inne 2. Inne 2. Inne 2. Inne 2	21		21	Yes	
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255 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a No 255 Section 501(c)(3) and 501(c)(4) organizations. Did the organization with a disqualified person in a proof year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If 'So,'' complete Schedule L, Part I 25b No 265 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, 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 II 27 No 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, 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 II 27 No 28 Max the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If 'Yes,'' complete Schedule L, Part II 28 No 28 Ord the organization facer or more officer, director, trustee, or key employee? If 'Yes,'' complete Schedule L, Part II 28 No 29 Did the organization receive more than \$25,00 in non-cash contributions? If 'Yes,'' complete Schedule L, Part II 28 No	С		24c		No
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year, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990. E27 If Z5b 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 iso, complete Schedule L, Part II Z6 No 27 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, or disqualified persons if iso, complete Schedule L, Part II Z7 No 28 Was the organization or party to a business transaction with one of the following parties (see Schedule L, Part II) No 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part II Z8a No 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV Z8a No 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Z9 Y es 30 Did the organization elevel, example, or discover a discover and the organization withons? If "Yes," complete Schedule M, Part II Z9 Yes 31 Did the organization elle, exchange, dispose of or transfer more than 25% of its net assets? If "Yes," complete Schedule M, Part II Z9 Yes 32 Did the organization elle, exchange, dispose of,	25a		25a		No
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instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a No b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b No 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 key employee (or a family member thereof) was an officer, director, trustee, or lives," complete Schedule L, Part IV 28c No 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 29 Yes 30 Image: Conservation contributions? If "Yes," complete Schedule M , Part I . 30 No 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I . 31 No 32 Did the organization own 100% of an entry disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . 33a Ves 34 Was the organization neare Schedule A, Part V, line 2 35a Yes 35a Did the organization receive any payment from or engage in any transaction with a controlled entry within the meaning of section 512(b)(13)? 35a Yes <th>27</th> <th>contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family</th> <th>27</th> <th></th> <th>No</th>	27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family	27		No
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Note. All Form 990 filers are required to complete Schedule O	37		37		No
	38				

	990 (2013)			Page .
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
		<u> </u>	Yes	., No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 25			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	Yes	
2a	gaming (gambling) winnings to prize winners?		Tes	
	Tax Statements, filed for the calendar year ending with or within the year covered 2a 97 by this return 97	,		
Ь	If at least one is reported on line 2a, did the organization file all required federal 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)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? \ldots .	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country EOC			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $$. $$.	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," dıd the organızatıon notıfy the donor of the value of the goods or services provided?	7b	Yes	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 7d	,		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
-	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			N -
L		7g		No
п	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans 13b	-		
-	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year? \ldots \ldots	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

	990 (2013) t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 74	h helc	w and	Page
r a i	"No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chang See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI	•	•••	ন
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			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		No
F	filed?	4 5		No No
5		5 6		
6 7-	Did the organization have members or stockholders?	0		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	<i>e.</i>)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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 conflicts?	12b	Yes	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	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 taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	_		L
17	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 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 v Own website V Another's website V Upon request V Other (explain in Schedule O)			

			•	•	• •		
19	Describe in Schedule O	whether (and If so	, how) the	organization	made its	governing docume	ents, conflict of
	interest policy, and fina	ncial statements a	vailable to	o the public o	luring the	tax year	

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶Brian B Allen 4001 Greenbriar Ste 200 Stafford, TX 77477 (281) 207-7809

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

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 compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h an	check (, unless) officer (ustee)	from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke; emplo;ee	Former Highest compensited empto; ee	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) David Welch	15 00	x		х			0	0	0
Chairman	0 00								
(2) Mollie Allen	4 00	x					0	0	0
Director (3) Steve Birdwell	0 00								
	2 00	х					0	0	0
Director (4) Kyle Brantley	0 00								
Director		x					0	0	0
(5) Jim Coleman	0 00 2 00								
Director	0 00	X					0	0	0
(6) Jerry Cox	2 00								
Director	0 00	X					0	0	0
(7) Danielle Dearing	2 00	x					0	0	0
Secretary	0 00	^					0	0	0
(8) Eric Francis	2 00	x					0	0	0
Director	0 00								-
(9) Michael Mulcahy	4 00	x					0	0	0
Director	0 00								
(10) Jım Reid	2 00	x					0	0	0
Director (11) Chris Seay	0 00								
		x					0	0	0
Director (12) Jack Vaughn Jr	0 00								
Director	0 00	X					0	0	0
(13) Michael Mantel	30 00								
President & CEO	10 00			х			206,195	0	27,766
(14) Gary Evans	35 00			~			156 443		0.010
Executive V P	5 00			Х			156,443	0	8,818
(15) James Malliet	20 00			х			138,584	0	23,902
CFO/Treasurer	20 00			^			130,304		
(16) Stacie Kopczynski	35 00			x			37,538	0	1,179
Secretary	5 00						,		,
(17) Robert Thorp	10 00					x	118,096	0	6,514
Vice President	30 00								Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				er)	Reportable compensation from the organization	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W-2/1099- MISC)	organızatıon and related organızatıons
18) Shona Barnard	20 00					x		118,741	0	8,477
ice President	20 00									
						<u> </u> ▶				
1b Sub-Total		• •	•	•		-				
			•	•		•		775,597		76,656

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	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? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	(B) Description of services	(C) Compensation						
2	Total number of independent contractors (including but not limited to those listed above) $$100,000$ of compensation from the organization $\blacktriangleright 0$	who received more than							

Form 99		-							Page 9
Part \	/1111	Statement o Check if Sched	o f Revenue ule O contains a res	pon	se or note to any lır	ie in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paıgns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es	1b					
20 90	с	Fundraising eve	ents	1c	2,612,109				
fts,	d	Related organiz	ations	1d					
, Gi	e	Government grant		1e					
Sir	f		ons, gifts, grants, and	 1f	21,435,494				
her		similar amounts no	ot included above	п					
of D	g	Noncash contributi 1a-1f \$	ons included in lines		441,660				
Con	h	Total. Add lines	s1a-1f		· · 🖌	24,047,603			
					Business Code				
enue	2a	Registration fees/0	Other		900099	7,747	7,747		
Program Serwice Revenue	Ь	Training fees			611000	39,586	39,586		
	с	Water program co	ntracts		221000	236,555	236,555		
	d								
i la	e			-					
ilo,	f	All other progra	am service revenue						
<u> </u>	g		s2a-2f			283,888			
	3		ome (including divid ar amounts)			94,842			94,842
	4		stment of tax-exempt bo		-	0			
	5	Royalties .	<u></u>	•	🕨	0			
		Current and the	(ı) Real	\rightarrow	(11) Personal				
	6a b	Gross rents Less rental		_					
	- c	expenses Rental income							
		or (loss)				0			
	a	d Net rental income or (loss)		· 	•••• • - (11) Other	Ű			
	7a	Gross amount from sales of assets other	2,241,947		669,017				
	ь	than inventory Less cost or		_					
		other basıs and sales expenses	2,263,297		114,000				
	C	Gain or (loss)	-21,350		555,017	F22 (77			
	d 8a	Net gain or (los Gross income f	s)	Г	••••	533,667			533,667
Other Revenue		events (not inc \$2,612	luding ,109 s reported on line 1c	:)					
er	.			a	92,000				
đ	b c		penses (loss) from fundraısı	b	126,282	-34,282			-34,282
-		Gross income f	rom gaming activition in the second						
	_E			a					
	b c		penses (loss) from gaming a	b activ	ities	0			
		Gross sales of returns and allo	inventory, less owances						
	_L			a L					
	b c		oods sold	b Inve	ntory 🛏	0			
	_	Miscellaneou			Business Code				
	11a								
	b								
	С								
	d	All other reven		L					
	e	Total. Add lines		•	· · · •	0			
	12	Total revenue.	See Instructions .	•	· · · •	24,925,718	283,888		594,227

	990 (2013)				Page 10
	TX Statement of Functional Expenses	othor are	one much	lata column (A)	
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al				
Do -	Check if Schedule O contains a response or note to any line in this ot include amounts reported on lines 6b,		 (B)	(c)	<u> </u> (D)
	b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	271,117	271,117		
2	Grants and other assistance to individuals in the United States See Part IV , line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	10,309,698	10,309,698		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	600,426	276,196	108,077	216,153
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	3,798,019	1,757,209	687,515	1,353,295
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	168,315	70,894	36,991	60,430
9	Other employee benefits	566,667	273,895	90,560	202,212
10	Payroll taxes	311,070	144,624	54,182	112,264
11	Fees for services (non-employees)				_
а	Management	0		1	
b	Legal	7,687		5,887	1,800
С	Accounting	40,115		40,115	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	336,952	137,991	34,079	164,882
12	Advertising and promotion	65.031		1,925	63,106
13	Office expenses	446,167	140,645		268,229
14	Information technology	263,853	92,085	,	146,460
15	Royalties	0	52,005	23,300	140,400
16	Occupancy	49,797	21,980	13,163	14,654
17		3,271,749	2,975,261		224,526
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2,575,201	71,502	221,320
19	Conferences, conventions, and meetings	0			
20		1,849		1,849	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	100,629	33,616	45,784	21,229
23	Insurance	152,945	94,450		31,206
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Water delivery projects	2,269,315	2,269,315		
b	Materials & supplies	273,651	273,651		
С	Licenses/permits/fees	221,746	23,074	27,407	171,265
d	Dues & subscriptions	83,353	30,971	25,668	26,714
е	All other expenses	110,580	15,088	18,196	77,296
25	Total functional expenses. Add lines 1 through 24e	23,720,731	19,211,760	1,353,250	3,155,721
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 ►				
				Fo	rm 990 (2013)

Balance Sheet

Part X

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(A) (B) Beginning of year End of year Cash-non-interest-bearing 8,717 12,404 1 1 2.143.352 2 1.340.955 2 Savings and temporary cash investments 549,425 1,489,795 3 3 Pledges and grants receivable, net 4 54.094 4 12.733 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 0 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 Assets 6 0 7 7 0 Notes and loans receivable, net 0 8 Inventories for sale or use 8 9 250,685 9 197,883 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 3,763,644 10a Part VI of Schedule D b Less accumulated depreciation 10b 1,002,163 3,143,388 10c 2,761,481 4,186,627 2.664.534 11 11 12 12 0 Investments—other securities See Part IV, line 11 0 13 13 Investments—program-related See Part IV, line 11 0 14 14 167,900 15 15 16 **Total assets.** Add lines 1 through 15 (must equal line 34) 8,814,195 16 10,169,778 645,066 17 963,358 17 18 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . 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 25 26 Total liabilities. Add lines 17 through 25 645.066 963,358 26 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔽 and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 7,094,697 27 7,622,848 1,074,432 1,583,572 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🦵 and complete lines 30 through 34. 5 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds Net Total net assets or fund balances 33 8,169,129 33 9,206,420 34 Total liabilities and net assets/fund balances 8,814,195 10,169,778 34 Form 990 (2013)

Form	990	(201	3)
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Par	t XI 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		24,9	925,718
2	Total expenses (must equal Part IX, column (A), line 25)	2		23,7	720,731
3	Revenue less expenses Subtract line 2 from line 1	3		1,2	204,987
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8,1	169,129
5	Net unrealized gains (losses) on investments	5			165,974
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			-1,722
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		9 2	206,420
Par	t XII Financial Statements and Reporting			- / -	
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				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," 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 review a separate basis, consolidated basis, or both	ved on			
	☐ 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 sepai basis, consolidated basis, or both	ate			
	🔽 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 oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No
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		Зb		

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		or 990E2		PUDIIC C nplete if the organiz	ation is a sec	ction 501(c)((1)	201	3
Treasu	,	of the enue Servic	e	 Attach to F Information 	orm 990 or l n about Sche		. 🕨 See sepai n 990 or 990-				pen to F Inspect	
Name	of th	ne organi	zation		<u></u>	nin Sigot / IC	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Employer	 ident if icat io	n numbei	r
Living	Water	Internation	al									
De		Deee	an far Du	hlie Chevity Cte					76-03248			
	rt I			Iblic Charity Sta te foundation becaus						istructions.		
1												
	'	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
2	'							- 170(6)(1)				
3				perative hospital se	_							
4	ļ			h organızatıon operat ıty, and state	ea în conjun	iction with a	nospital desi	cribed in sec	tion 170(D)(I)(A)(III). E	nter the	
5	Г			erated for the benefi	t of a college	e or universit	y owned or o	perated by a	government	tal unit desc	rıbed ın	
		-	-	(A)(iv). (Complete P	-			. ,	-			
6	Г					tal unit desc	rıbed ın secti	on 170(b)(1)(A)(v).			
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) 					c						
8				described in section								
9	ļ	-		at normally receives					-	-		SS
				vities related to its ex								
				oss investment inco						tax) from bu	sinesses	
	_			ganızatıon after June								
10				ganized and operated								<i>,</i>
11	' 	one or r the box a	organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpos or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). box that describes the type of supporting organization and complete lines 11e through 11h Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integra				.Check ated					
e f		other th section	ian foundat 509(a)(2)	ox, I certify that the ion managers and ot received a written de	ner than one	or more pub	licly support	ed organızat	ions describ	ed in sectior	n 509(a)(1)or
g		check t Sınce A	hıs box	2006, has the organ							ng organi	Г
				rectly or indirectly o	ontrols, eith	ier alone or t	ogether with	persons des	cribed in (ii)		Yes	No
				governing body of th	-		-			11g		
				er of a person descri						11g(<u> </u>
			-	Iled entity of a perso			above?			11g(
h				ng information about								1
(i) Name of supported organization		(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is organizati col (i) Iis your gove docume	ion in ted in rning	(v) Did you the organi in col (i) o suppor	zation f your	(vi) Is to organizati col (i) org in the U	ion in anized	mon	nount of etary port	
				instructions))	Yes	No	Yes	No	Yes	No	1	
Tota												

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

	edule A (Form 990 or 990-EZ) 201						Page 2
Pa	Complete only if you	or Organizatio	ons Described	in Sections 1	70(b)(1)(A)(i	v) and 170(b)	(1)(A)(vi)
	Part III. If the organiz	ation fails to gu	alify under the	tests listed belo	w, please com	plete Part III.)	any under
	ection A. Public Support					· · · · · ·	
Cal	endar 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	10,497,94	5 17,281,951	20,124,685	20,069,119	24,047,603	92,021,303
	not include any "unusual			,	,,	,,	,,
2	grants ") Tax revenues levied for the						
-	organization's benefit and either						0
	paid to or expended on its						Ŭ
3	behalf The value of services or facilities						
3	furnished by a governmental unit						0
	to the organization without						U
_	charge	10 407 044		20.124.605	20.000.110	24.047.002	02 021 202
4 5	Total. Add lines 1 through 3 The portion of total contributions	10,497,94	5 17,281,951	20,124,685	20,069,119	24,047,603	92,021,303
5	by each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						2,002,204
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5						90,019,099
5	from line 4 ection B. Total Support						
	endar year (or fiscal year				<i>(</i>) , , , , , , , , , ,		
	beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	A mounts from line 4	10,497,945	17,281,951	20,124,685	20,069,119	24,047,603	92,021,303
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties	79,400	18,699	24,896	150,655	94,842	368,492
	and income from similar						
~	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						0
	carried on						
10	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						0
	IV)						
11	Total support (Add lines 7 through 10)						92,389,795
12	Gross receipts from related activit	lies, etc (see inst	tructions)			12	691,643
13	First five years. If the Form 990 is			. third, fourth, or f	ifth tax vear as a		
	this box and stop here	<u></u>			•		· —
	ection C. Computation of Pu						
14	Public support percentage for 201			11, column (f))		14	97 430 %
15	Public support percentage for 201	2 Schedule A, Pa	rt II, line 14			15	94 770 %
16a	33 1/3% support test—2013. If the				ne 14 is 33 1/3%	or more, check th	
h	and stop here. The organization qu 33 1/3% support test-2012. If the				and line 15 is 33	1/3% or more che	ck this
5	box and stop here. The organization					1/3/0 01 more, ene	► T
L7a	10%-facts-and-circumstances test	t —2013. If the org	anızatıon dıd not c	heck a box on lın		·	·
	is 10% or more, and if the organiz						ted
	in Part IV how the organization me organization	ets the lacts-an	u-chicumstances	test ine organiz	acion quannes as	a publiciy suppor	tea >
b	10%-facts-and-circumstances test						•••
	15 is 10% or more, and if the orga						
	Explain in Part IV how the organiz supported organization	ation meets the "	acts-and-circums	tances test ine	e organization qua	nnes as a publicly	∕ ▶┌─

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

₽厂

Part	Support Schedule for Organizations Described in Section 509(a)(2)
	Support Schedule for Siguilizations Beschibed in Section Sos(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under

 alendar year (o Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta A mounts in received frod disqualified the greater amount on c Add lines 7 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr Gross inco dividends, securities 1 Net income business a in line 10b, business is Other income gain or loss capital ass IV) Total support 	Public Support (or fiscal year beginning in) ▶ ants, contributions, and ship fees received (Do not any "unusual grants ") ceipts from admissions, dise sold or services ad, or facilities furnished in	1				mplete Part II.)
 Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add A mounts in received fro disqualified the greater amount on c Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities 1 Net income business a in line 10b, business is capital ass IV) Total support 	in) ► ants, contributions, and ship fees received (Do not any "unusual grants ") ceipts from admissions, dise sold or services				1	1	
 Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not and business uit Tax revenu organizatio paid to or e behalf The value of furnished b the organizatio Total. Add A mounts in received fro disqualified the greater amount on c Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr and income sources Unrelated b income (les from busine june 30, 10 c Add lines 1 Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV) Total support 	ants, contributions, and ship fees received (Do not any "unusual grants") ceipts from admissions, dise sold or services	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
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merchandis performed, any activity organizatio purpose Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T lendar year (o Amounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) Total suppo	dise sold or services						
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and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities I and income sources Unrelated I income (les from busine June 30, 1 c Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) B Total support	s included on lines 1, 2,				1		
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the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities and income sources 9 Unrelated I income (les from busine June 30, 1 c Add lines 1 L Net income business a in line 10b business is 2 Other incol gain or loss capital ass IV) 3 Total suppo	from other than						
amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities la and income sources 9 Unrelated H income (les from busine June 30, 19 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total support	ied persons that exceed						
 c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o A mounts fr a Gross inco dividends, securities li and income sources b Unrelated B income (les from busine June 30, 10 c Add lines 1 L Net income business a in line 10b, business is c Other income gain or loss capital ass IV) 3 Total support 	ter of \$5,000 or 1% of the on line 13 for the year						
B Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities l and income sources Unrelated l income (les from busine June 30, 10 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) B Total support							
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and income sources Unrelated b income (les from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) 3 Total suppo	s, payments received on						
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 b Unrelated b income (less from busine June 30, 14 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total support 	me from similar						
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from busine June 30, 1 Add lines 1 Net income business a in line 10b business is Other incol gain or loss capital ass IV) Total supp	less section 511 taxes)						
June 30, 19 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total suppo	inesses acquired after						
 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) Total support 							
business a in line 10b, business is 0 Other incol gain or loss capital ass IV) 3 Total suppo	s 10a and 10b						
In line 10b, business is O ther incol gain or loss capital ass IV) 3 Total supp	me from unrelated						
business is O ther incol gain or loss capital ass IV) 3 Total supp	s activities not included						
2 Other Incol gain or loss capital ass IV) 3 Total suppo	Ob, whether or not the						
gaın or loss capıtal ass IV) 3 Total supp	s is regularly carried on						
capital ass IV) 3 Total suppo	come Do not include						
IV) 3 Total suppo	oss from the sale of ssets (Explain in Part						
B Total suppo							
11, and 12	port. (Add lines 9, 10c,						
		for the organızatı	on's fırst, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	12) years. If the Form 990 is f						▶
	12) 2 years. If the Form 990 is f is box and stop here			10 1 (0)		- I - I	
Public supp	12) years. If the Form 990 is f is box and stop here Computation of Publ	(line 8, column (f) divided by line	13, column (f))		15	
Public supp	12) 2 years. If the Form 990 is f is box and stop here		art III, lıne 15			16	
Section D. C	12) years. If the Form 990 is f is box and stop here Computation of Publ	.2 Schedule A, P		ae			
	12) years. If the Form 990 is f is box and stop here Computation of Publ ipport percentage for 2013		me Percenta		(17	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201	estment Inco			ın (f))	1 1/ 1	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2	estment Inco 2013 (line 10c, c	olumn (f) dıvıded	by line 13, colum	in (f))		
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from	estment Inco 2013 (line 10c, ca n 2012 Schedule	olumn (f) dıvıded A, Part III, lıne 1	by line 13, colum 7		18	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from support tests—2013. If the	estment Inco 2013 (line 10c, co n 2012 Schedule organization did	olumn (f) divided A , Part III , line 1 not check the bo	by line 13, colum 7 x on line 14, and	line 15 is more t	18 han 33 1/3%, and	
IS not more	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from	estment Inco 2013 (line 10c, co n 2012 Schedule organization did and stop here. Th	olumn (f) divided A , Part III , line 1 not check the bo e organization qu	by line 13, colum 7 x on line 14, and alifies as a public	line 15 is more t cly supported org	18 han 33 1/3%, and anization	►

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test						
Return Reference	Explanation					

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493189014044							
SCHEDULE D Form 990)			al Statements			омв № 11 20	
	► Complete if the or Part IV, line 6, 7, 8, 9, 1		ered "Yes," to Form 990 2. 11d. 11e. 11f. 12a. or			Z V	IJ
epartment of the Treasury itemal Revenue Service	🕨 Attach to Form 990. 🕨 See separate	instructions. 🕨	Information about Sche <u>irs.gov/form990</u> .	edule D	(Form 990)	Open to Inspe	
Name of the organ				Emp	loyer ident	ification num	ıber
Part I Organ	instigue Maintaining Denoy Ad	viced Funde	an Othan Similar F		324875		lata if tha
	nizations Maintaining Donor Adv zation answered "Yes" to Form 990			unas	DF ACCOU	nts. Comp	lete if the
		(a) Dor	or advised funds		(b) Funds a	and other acc	ounts
L Total number a	,						
	itributions to (during year)						
	nts from (during year)			_			
	ue at end of year	L					
funds are the	zation inform all donors and donor adviso organization's property, subject to the or	rganization's exc	clusive legal control?			∏ Yes	5 🗆 No
used only for a conferring imp	zation inform all grantees, donors, and d charitable purposes and not for the bene permissible private benefit?	fit of the donor o	r donor advisor, or for a	iny othe	r purpose	∏ Yes	,
	ervation Easements. Complete if			to Forn	1 990, Par	rt IV, line 7	
☐ Preservati	conservation easements held by the org on of land for public use (e g , recreation of natural habitat						a
🔽 Preservatı	on of open space						
	s 2a through 2d if the organization held a the last day of the tax year	a qualified conse	ervation contribution in	the form	n of a conse	ervation	
Tabal mumban	- f				Held at	the End of t	he Year
-	of conservation easements			2a			
- 0	restricted by conservation easements			2b			
d Number of cor	nservation easements on a certified histons nservation easements included in (c) acc cure listed in the National Register			2c 2d			
	nservation easements modified, transferi 	red, released, ex	tinguished, or terminat	ed by th	e organızat	tion during	
Number of sta	tes where property subject to conservat	ion easement is	located 🕨				
	nızatıon have a written policy regardıng i f the conservation easements it holds?	the periodic mor	nitoring, inspection, han	ıdlıng of	violations,	and [Yes	;
Staff and volu	nteer hours devoted to monitoring, inspe	cting, and enfor	cing conservation ease	ments d	uring the y	ear	
	penses incurred in monitoring, inspecting	g, and enforcing	conservation easement	s during	, the year		
Does each co	nservation easement reported on line 2(70(h)(4)(B)(ii)?	d) above satisfy	the requirements of se	ction 17	'0(h)(4)(B)	(I)	5 🗆 No
balance sheet	describe how the organization reports con , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the					
	nizations Maintaining Collection			or Ot	ner Simil	ar Assets.	•
	lete if the organization answered "Y ation elected, as permitted under SFAS 1				tement and	halance sho	et
works of art, h	istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for publi	c exhibition, education,	or rese	arch ın furt		
works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for publi					ıplıc
(i) _{Revenues}	included in Form 990, Part VIII, line 1				►\$_		
(ii) _{Assets inc}	cluded in Form 990, Part X						
2 If the organiza	ation received or held works of art, histor unts required to be reported under SFAS						
a Revenues incl	uded in Form 990, Part VIII, line 1				►\$_		
b Assets includ	ed ın Form 990, Part X				► \$		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Cat No 52283D	Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013									Page 2
Part	Organizations Maintaining Co	llections of Art	, His	torio	cal Trea	asure	s, or Othe	r Similar Asso	e ts (cor	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds,ch	neck a	any of the	followi	ing that are a	sıgnıfıcant use o	fıts	
а	Public exhibition		d	Γ	Loan or	exchar	nge programs			
b	Scholarly research		е	Γ	Other					
с	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	w they	/ further t	he orga	anızatıon's ex	empt purpose in		
5 Par	During the year, did the organization solicit of assets to be sold to raise funds rather than to the sold to raise funds rather than the solution of the solut	o be maintained as	part o	ofthe	organizat	tion's c	ollection?			<u> </u>
	Part IV, line 9, or reported an an									
1 a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary	for co	ontributio	ns or o	other assets i		Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving ta	able					
								Amo	unt	
C L	Beginning balance						1c			
d	Additions during the year						1d			
e f	Distributions during the year						1e 1f			
	Ending balance		1 -				11		Yes	
2а ь	Did the organization include an amount on Fo									
b	If "Yes," explain the arrangement in Part XII								<u></u>	·
Pa	rt V Endowment Funds. Complete	(a)Current year)Priory				Three years back (a)Four ve	ars back
1a	Beginning of year balance			<u>, </u>		. ,	<u>, ()</u>	, j		
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balan	e (lin	ie 1g,	column (a)) hel	d as			
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
с	Temporarily restricted endowment > The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
За	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	ire held a	nd adm	ninistered for	the	Yes	No
	(i) unrelated organizations					•		3a(i)	+ +	
	(ii) related organizations							3a(ii)	+	
ь 4	If "Yes" to 3a(II), are the related organizatio Describe in Part XIII the intended uses of th					•		3b		
-	t VI Land, Buildings, and Equipme	-				nswer	red 'Yes' to	Form 990 Part	TV lin	
	11a. See Form 990, Part X, line :		ine o	rgan	ization a					
	Description of property				Cost or oth s (investme) Cost or other basıs (other)	(c) Accumulated depreciation	(d) Boo	ok value
1a	Land						404,738			404,738
b	Buildings						2,657,480	450,293	2	,207,187
с	Leasehold improvements		•							
d	Equipment						600,457	551,870		48,587

. .

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

. . .

e Other .

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chedule	D (Form	1 00N)	2013

100,969

2,761,481

S

100,969

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Schedule D (Form 990) 2013		Page 3
Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.		answered 'Yes' to Form 990, Part IV, line 11b.
 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Cor	nplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. Complete if the organization (a) Descrip		0, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	
Part X Other Liabilities. Complete if the organ	nization answered 'Yes' t	to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal income taxes		

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) Þ.

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Г

Schedule D (Form 990) 2013 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990. Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 1 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments 2a а Donated services and use of facilities 2h h Recoveries of prior year grants 2c С d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 2e 3 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4 Investment expenses not included on Form 990, Part VIII, line 7b 4a а 4h b Add lines **4a** and **4b** С **4**c 5 Total revenue Add lines **3** and **4c.** (This must equal Form 990. Part I, line 12) 5 Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete If the organization answered 'Yes' to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a а Prior year adjustments 2h b С Other losses 2c 2d Other (Describe in Part XIII)...... d 2e e 3 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 . . а 4a Other (Describe in Part XIII) 4b b Add lines **4a** and **4b** **4**c С 5 5 Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)

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

Part XIII Supplemental Info	prmation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2013

efi	le GRAPHIC pri	int - DO NOT	PROCESS	As Filed Dat	ta -	DLN:	93493189014044
SCHEDULE F		Stat	ement of A	Activities C	Outside the Unit	ed States	OMBNo 1545-0047
(FO	rm 990)		► Complete i	f the organizatio Part IV, line 1	990,	2013	
► Attach to Form 990. ► See separate instructions. ► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990						Open to Public Inspection	
	e of the organization g Water Internation					Employer ident	tification number
	5					76-0324875	
Ра	rt I General "Yes" to I	Information Form 990, Pai	n on Activiti rt IV, lıne 14b	es Outside th	ne United States. Co	omplete if the organiz	ation answered
2 3	For grantmake assistance outs	rs. Describe ir ide the United	n Part V the or d States.	ganızatıon's p	rocedures for monitori uplicated if additional spa	ng the use of its gran	
	(a) Region	1	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	See Add'l Data			region	region)		

b Т t				
	Sub-total			16,077,152
	Fotal from continuation sheets to Part I			
	Fotals (add lines 3a and 3b)			16,077,152

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

Page **2**

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

_									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								
2		mber of recipier / the IRS, or for	nt organizations lis r which the grantee	ted above that are r e or counsel has pro	recognized as charit ovided a section 501	ties by the foreign c L(c)(3) equivalency	ountry, recognized letter	as 	15
3	Enter total nur	mber of other o	rganizations or en	tities	<u>.</u> .	<u>.</u> .			2
								Schedule F	[;] (Form 990) 2013

Schedule F (Form 990) 2013

Page **3**

(a) Type of grant or	(b) Region	(c) Number of	(d) A mount of	(e) Manner of cash	(f) A mount of	(g) Description	(h) Method o
assistance		recipients	cash grant	dısbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV , appraisal, othe

1	Was the organization a US transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	ম	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	<u> </u>	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	F	Yes	শ	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	ম	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	F	Yes	শ	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	L	No

Schedule F (Form 990) 2013

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ReturnReference	Explanation
Part I, Line 2 -	Living Water provides
Grantmakers	services in developing
Explanation For	countries by providing
Monitoring Use of Funds	support to independent
Outside US	non-profit and other
	organizations that have
	missions and goals
	similar to those of
	Living Water LWI has
	assisted in the
	formation of non-
	governmental
	organizations (NGOs)
	to facilitate the conduct
	of programs LWI
	provides technical and
	governance assistance
	through control of their
	boards and is
	significantly involved
	with the NGO's
	personnel as described
	ın Form 990, Part III,
	line 4 LWI requires the
	grantee to provide
	evidence as to the use
	of the funds, such as a
	written report,
	photographs, field
	inspection by an LWI
	representative or other
	verification as deemed
	appropriate
	Schodulo E (Earm 990) 2013

Schedule F (Form 990) 2013

Software ID: 13000170 Software Version: 2013v3.1 EIN: 76-0324875 Name: Living Water International

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Cent Amer/Carıbbean	0	0	Program services	Water projects	3,896,232
Cent Amer/Carıbbean	0	0	Grantmakıng	Water projects	2,523,436
Sub-Saharan Afrıca	0	0	Program services	Water projects	1,578,009

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	ucted in region (by) (i e , fundraising, ogram services, nts to recipients(d) is a program service, describe specific type of service (s) in region	
Sub-Saharan Afrıca	0	0	Grantmakıng	Water projects	6,182,328
South America	0	0	Program service	Water projects	217,499
South America	0 Grantmaking		Grantmakıng	Water projects	31,286

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asıa	0	0	Program service	Water projects	24,000
South Asia	0	0	Program services	Water Projects	41,298
South Asia	0	0	Grantmakıng	Water projects	958,739

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America	0	0	Program service	Water projects	10,415
North America	rth A merica 0 0		Grantmakıng	Water projects	613,910

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Cen Am/Carıb	Water proj	1,125,065	Wire			
		Cen Am/Carıb	Water proj	1,372,359	Wire			
		Cen Am/Carıb	Water proj	26,012	Wire			
		North America	Water Proj	613,910	Wire			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		South America	Water proj	13,056	Wire			
		South America	Water proj	18,230	Wire			
		South Asia	Water proj	296,882	Wire			
		South Asia	Water proj	317,341	Wire			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assıstance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		South Asıa	Water proj	404,516	Wire			
		Sub-Sah Africa	Water proj	1,070,876	Wire			
		Sub-Sah Africa	Water proj	1,194,857	Wire			
		Sub-Sah Afrıca	Water proj	1,221,473	Wire			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Sub-Sah Africa	Water proj	20,400	Wire			
		Sub-Sah Africa	Water proj	473,533	Wire			
		Sub-Sah Africa	Water proj	555,664	Wire			
		Sub-Sah Africa	Water proj	772,734	Wire			

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		Sub-Sah Africa	Water proj	976,091	Wire			

efile GRAPHIC prin	t - DO NOT PROCESS	As Filed Da	ata -		DLN	93493189014044
SCHEDULE G (Form 990 or 990-EZ)	Fun Complete if the organiz organiz	draising or ization answered "Yes ation entered more tha	Gam 5" to Form an \$15,00	tion Regard ing Activitie 990, Part IV, lines 17, 1 0 on Form 990-EZ, line	2 S 18, or 19, or if the 6a.	омв № 1545-0047 2013 Ореп to Public
nternal Revenue Service	Attack Information about Sche			See separate instructions is at w		Inspection
Name of the organization Living Water Internationa		uue a (rom 990 of 9	90-22 / 811	u its instructions is at w		ntification number
	ng Activities. Complet Z filers are not require					
1 Indicate whether th	e organization raised funds	through any of th	ne follow	ung activities Che	eck all that apply	
a 🔽 Mail solicitation	IS		еГ	Solicitation of non	-government grants	
b $\bar{\}$ Internet and em	ail solicitations		f∏	Solicitation of gov	ernment grants	
c 🔽 Phone solicitati	ons		g 🗆	Special fundraisin	g events	
d 🔽 In-person solic	Itations					
or key employees li b If "Yes," list the ter	n have a written or oral agr sted in Form 990, Part VII n highest paid individuals o at least \$5,000 by the org) or entity in coni r entities (fundrai	nection	with professional f	undraising services?	F yes F N a
(i) Name and address ındıvıdual or entity (fundraisei		Ity (iii) DId fundraiser have custody or control of contributions?) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes No				
		🕨				

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

.

	idule rt II	G (Form 990 or 990-EZ) 2013 Fundraising Events. Com	nlete if the organizati	on answered "Ves" to	Form 990 Part IV	Page 2
ra		more than \$15,000 of fundr events with gross receipts g	aising event contribut			
			(a) Event #1 Houston Gala	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Ш	1	Gross receipts	2,704,10	ə		2,704,109
Revenue	2	Less Contributions	2,612,10	9		2,612,109
~	3	Gross income (line 1 minus line 2)	92,00	þ		92,000
	4	Cash prizes				
ഗ	5	Noncash prizes				
, USe	6	Rent/facility costs				
Expenses	7	Food and beverages	124,53	2		124,532
Drea	8	Entertainment	1,75	þ		1,750
ā	9	Other direct expenses .				
	10	Direct expense summary Add lir	nes 4 through 9 in columi	n (d)		(126,282)
	11	Net income summary Subtract li				- 34,282
Par	t II			"Yes" to Form 990, Pa	irt IV, line 19, or rep	
	<u> </u>	\$15,000 on Form 990-EZ, lı				
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
ά	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			Г <u>Yes%</u>	└ Yes%	└ Yes%	
	6	Volunteer labor		□ No	∏ No	
	7	Direct expense summary Add line	s 2 through 5 in column	(d)		
	8	Net gaming income summary Sub	tract line 7 from line 1 c	olumn (d)	•	
	•					
9		ter the state(s) in which the organiz				
a b		the organization licensed to operate No," explain				
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspe	nded or terminated during	the tax year?	
						I

Schedule G (Form 990 or 990-EZ) 2013

Does the organization operate gaming activities with nonmembers? Image: Comparization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in a The organization's facility a The organization's facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name ▶	
formed to administer charitable gaming? Image: Comparison of the percentage of gaming activity operated in 13 Indicate the percentage of gaming activity operated in a The organization's facility b An outside facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name ▶	No
13 Indicate the percentage of gaming activity operated in a The organization's facility 13a b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name	
a The organization's facility 13a b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name	sГNo
 b An outside facility	
 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? revenue? 	%
Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	%
Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
revenue?	
revenue?	
	_ _
b If "Yes." enter the amount of gaming revenue received by the organization IP \$ and the	S I NO
b If "Yes," enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party * \$	
c If "Yes," enter name and address of the third party	
Name 🕨	
Address 🕨	
16 Gaming manager information	
Name 🕨	
Gaming manager compensation 🏲 \$	
Description of services provided 🕨	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	s 🗖 No
 b Enter the amount of distributions required under state law distributed to other exempt organizations or spent 	5 1 110
in the organization's own exempt activities during the tax year 🕨 \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	v), and
Return Reference Explanation	

Page **3**

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLN: 93493189014044
Schedule I (Form 990)		Grants and Ot Governments an Nplete if the organizati	nd Individuals i	n the United S ⁵ Form 990, Part IV, line	tates	-	омв № 1545-0047 2013
Department of the Treasury Internal Revenue Service	► Inform	ation about Schedule I	Attach to Form 9 (Form 990) and its inst		.gov /form990.		Open to Public Inspection
Name of the organization						Employer	identification number
						76-032	4875
 Does the organization methods the selection criteria use Describe in Part IV the criteria in the selection of the se	ed to award the grants o organization's procedur	tantiate the amount of t or assistance? es for monitoring the us	e of grant funds in the l	Jnited States	•••••		
		Governments and recipient that receive					
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descript non-cash assi	
(1) By Provision 130 Inverness Plaza Ste 300 Birmingham, AL 35242	68-0538811	501(c)(3)	32,000	0			General support
(2) Fenton Moorehead Assoc 825 Brielle Court Simpsonville,SC 29681	23-7219520	501(c)(3)	60,000	0			Church Planting Evangelism Africa
(3) Heritage Baptist Church 2223 FM 1092 Rd Missouri City,TX 77459	23-7216060	501(c)(3)	24,000	0			Water pure equipment
(4) Integrated Community Dev Int PO Box 247 Winona Lake, IN 46590	32-0112278	501(c)(3)	129,517	0			General support
(5) Me to You Missions 2310 Second Loop Rd Florence, NC 29501	27-4828307	501(c)(3)	20,000	0			General support
(6) Water ıs Lıfe Intl 399 Carolına Ave Ste 200 Wınter Park, FL 32789	20-5951140	501(c)(3)	5,600	0			General support

2 Ente	cer total number of section 501(c)(3) and government organizations listed in the line 1 table .															-	
---------------	--------------------------------------	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	---	--

6

0

Schedule I (Form 990) 2013

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistanc	e	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Ir	nforma	tion. Provide the info	ormation required in Pa	rt I, line 2, Part III, col	umn (b), and any other a	dditional information.
Return Reference	Explana					
		uires the grantee to prov verification as deemed		e of the funds, such as a wr	itten report, photographs, fiel	d inspection by an LWI representative

Schedule I (Form 990) 2013

efile GRAPHIC p	print - DO NOT PROCESS As			DLN: 934	9318	9014	044
Schedule J	Comp	ensation In	formation	ΟΜΕ	3 No 1	545-0	047
(Form 990)		rectors, Trustees, Compensated Emp	Key Employees, and Highest		20	13	1
			es" to Form 990, Part IV, line	23.			
epartment of the Treasury			parate instructions.		oen to Inspe		
Name of the organi	► Information about Schedule J (Fe	orm 990) and its i		<u>v/form990</u> . nployer identificati			
Living Water Internation				npioyer identificati	on nun	iber	
			76	5-0324875			
Part I Quest	ions Regarding Compensation	า					
						Yes	No
	ropiate box(es) if the organization pro Section A, line 1a Complete Part III						
	s or charter travel	· _ ·	allowance or residence for pe				
Travel for	companions		s for business use of persona				
Γ Taxıdemn	nification and gross-up payments		social club dues or initiation	fees			
Discretion	nary spending account	Personal	services (e g , maid, chauffei	ur, chef)			
	oxes in line 1a are checked, did the or t or provision of all of the expenses de				1b		
	zation require substantiation prior to r						
directors, trusi	tees, officers, including the CEO/Exec	cutive Director, re	garding the items checked in	line 1a?	2		
	, if any, of the following the filing organ			the			
	CEO/Executive Director Check all th ted organization to establish compens			un in Part III			
	ation committee		mployment contract				
	ent compensation consultant	·	ation survey or study				
Form 990	of other organizations	🔽 Approval	by the board or compensatio	n committee			
4 During the yea or a related org	r, dıd any person lısted ın Form 990, I ganızatıon	Part VII, Section /	A, line 1a with respect to the	filing organization			
a Receive a seve	erance payment or change-of-control	payment?			4a		No
b Participate in,	or receive payment from, a supplement	ntal nonqualified re	etırement plan?		4b		No
c Participate in,	or receive payment from, an equity-ba	ased compensatio	n arrangement?		4c		No
	of lines 4a-c, list the persons and pr			art III			
5 For persons lis) and 501(c)(4) organizations only mu ited in Form 990, Part VII, Section A, contingent on the revenues of	-		,			
a The organization					5a		No
b Any related or					5a 5b		No
	e 5a or 5b, describe in Part III						
6 For persons lis	sted in Form 990, Part VII, Section A, contingent on the net earnings of	line 1a, did the oi	rganization pay or accrue any	,			
a The organization					6a		No
b Any related or					6b		No
	e 6a or 6b, describe in Part III						
7 For persons lis	sted in Form 990, Part VII, Section A, described in lines 5 and 6? If "Yes," c			ixed	7		No
	unts reported in Form 990, Part VII, p						
	initial contract exception described in				8		No
9 If "Yes" to line	8, did the organization also follow the	e rebuttable presu	mption procedure described i	n Regulations			
section 53 49			-	-	9		No

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 in 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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred In prior Form 990
(1) Gary Evans Executive V P	(i) (ii)	156,443			7,762	1,056	165,261	
(2) James Mallıet CFO/Treasurer	(i) (ii)	138,584			22,946	956	162,486	
(3) Mıchael Mantel President & CEO	(i) (ii)	206,195			16,658	11,108	233,961	

Schedule J (Form 990) 2013

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

Return Reference

Explanation

Schedule J (Form 990) 2013

efile GRAPHI	C print	: - DO	NOT PR	OCESS	As Filed [Data -				DLN	: 9349	3189	014044
Schedule L			٦	ransact	tions wit	h Interest	ed Perso	ons			ОМВ	No 154	45-0047
Form 990 or 990	0-EZ)		"Yes'	► Co on Form 99 or I	omplete if the 90, Part IV, li Form 990-EZ,	e organization a nes 25a, 25b, 20 Part V, line 38a	answered 6, 27, 28a, 28t a or 40b.	o, or 28c			-	201	
epartment of the Treasun temal Revenue Service	y	Þ			hedule L (Fo	1 990-EZ. ► See rm 990 or 990-I 5.gov/form990	EZ) and its ins			:		en to nspec	Public tion
Name of the org Living Water Intern		า						E	Employ	/er ident	tificatio	on numb	er
										24875			
Part I Exce						(3) and sectio 90, Part IV, line						405	
1 (a) Name						n disqualified	(c) Des						rrected?
				pers	on and organ	lization						Yes	No
													_
													_
													_
													_
													_
			I										_
2 Enterthea 4958				-	-	r dısqualıfıed pe	-		runde	rsectioi	n 		
3 Enterthe a	mount of	tax, ıf	any, on lır	ie 2, above,	reimbursed b	by the organizat				► \$			
Part II Loa	ans to a	and/o	or From	Interest	ed Person	<u> </u>							
Cor	nplete if	the org	anızatıon	answered "\	íes" on Form	990-EZ, Part V		Form 9	90, Pa	art IV, li	ine 26,	orıfthe	•
orga (a) Name of	anızatıon (b)		ed an amo (c)	unt on Form		<u>, line 5, 6, or 22</u> (e)Original	2 (f)Balance	(g) In		(h)		(i)	rıtten
interested	Relation	nship	Purpose	of or from	the	principal	due	defaul		Approv	/ed		ement?
person	witl organiz		loan	organızat	ion?	amount				by board			
	J									or	++ 7		
				То	From	_		Yes	No	commi Yes	No	Yes	No
												_	
												_	
												_	
												_	
otal			► \$										
						ed Persons. n Form 990, P	Part IV. line	27.					
(a) Name of in				ship betwee		unt of assistance			istanc	:e (e) Purpo	se of as	sistance
person	ı	Int	•	erson and th Ization	ie								
			organ	241011									
							_						
or Paperwork Red	luction Ac	t Notic	e, see the	Instructions	for Form 990	or 990-EZ.	Cat No 50056	5A	Sch	edule I /	Form of	90 or 99	0-EZ) 201

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	: zation's
				Yes	No
(1) Sharon Evans	Officer Spouse	56,506	Employee compensation		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference

Explanation

Schedule L (Form 990 or 990-EZ) 2013

efil	e GRAPHIC p	orint - DO NOT PR	OCESS	As Filed Data -		DLN:	93493189	014	044
	EDULE M		No	ncash Contri	hutions		OMB No 15	45-0	047
(For	n 990)				5410115		201	12	
		►Con		he organizations answ			20'	JJ	
Departn	nent of the Treasury			990, Part IV, lines 29 ► Attach to Form 9			Open to	Pub	lic
	Revenue Service		Schedule N	1 (Form 990) and its ins	ructions is at <u>www.irs.g</u>		Inspe	ctior	
Name	e of the organiza Water International	tion				Employer ident	ification num	ber	
						76-0324875			
Ра	rtI Types	of Property	1	1	1	- 1			
			(a)	(b)	(c)		(d)		
			Check If	Number of contributior or items contributed	IS Noncash contributio amounts reported or		od of determi contribution a	-	nts
			applicable		Form 990, Part VIII				
					line 1g				
	Art—Works of a Art—Historical t								
	Art—Fistorical t Art—Fractional i								
	Books and publi								
	Clothing and ho								
	goods								
	Cars and other								
	Boats and plane Intellectual prop								
	Securities—Pub		x		425.9	80 NYSE			
		sely held stock			125,5				
	Securities—Part								
	or trust interest								
		cellaneous							
13	Qualified consei contribution—Hi								
	structures .								
14	Qualified conser								
15	contribution—O Real estate—Re								
	Real estate—Co								
	Real estate—Ot								
18	Collectibles .								
19	Food inventory								
	Drugs and medu								
	Taxidermy								
	Historical artifa								
	Scientific specii Archeological ai	rtifacts							
	Other►(X		1 15,6	80 Cost			
Drilli	ng mud)		_		,				
	Other►(
	Other►(
	Other►(l tion during the tax year f	or contributions				
				Part IV, Donee Acknow		29			
	-				· · · · ·	•		Yes	No
30a					y reported in Part I, lines		that		
		-			on, and which is not requi	red to be used			
_				1?			· 30a		No
b	If "Yes," descr	be the arrangement in	n Part II						
31	Does the organ	ization have a gift acc	eptance po	licy that requires the re	view of any non-standard	contributions?	31	Yes	
32a			rd parties o	r related organızatıons t	o solicit, process, or sell	noncash			
	contributions?						32a		No
	If "Yes," descr								
33	If the organizat		mount in co	olumn (c) for a type of pr	operty for which column (a) is checked,			

describe in Part II For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2013)

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -		DLN: 93493189014044
SCHEDULE O				OMBNo 1545-0047
(Form 990 or 990-EZ)	Supplementa	al Information to	o Form 990 or 990-EZ	2013
Department of the Treasury Internal Revenue Service		ide information for res 90 or to provide any ad ▶ Attach to Form 99		Open to Public Inspection
	Information about	Schedule O (Form 990 o www.irs.gov/fo	or 990-EZ) and its instructions is at rm990.	
Name of the organization Living Water International	on		Employe	r identification number
			76-032	4875

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 1a Explanation of Delegated Broad Authority to Commttee	Executive Committee The Executive Committee shall consist of the Chairman of the Board, the Chairman-Elect, President & CEO, CFO & Treasurer, and two (2) Board Members to be elected by the Board to serve a term of twelve (12) months and shall meet to conduct the business of the corporation. The Executive Committee, to the extent provided in said resolution shall have and exercise the authority of the Board of Directors in the management of the corporation. How ever, no such committee shall have the authority of the repealing of the By-law s, electing, appointing or removing any member of any such committee or any Director or Officer of the corporation, amending the Articles of Incorporation, adopting a plan of merger or adopting a plan of consolidation with another corporation, authorizing the voluntary dissolution of the corporation or revoking proceedings therefor, adopting a plan for the distribution of the assets of the corporation, or amending, altering or repealing any resolution of the Board of Directors which by its terms provides that it shall not be amended, altered or repealed by such committee All actions of the Executive Committee must be reported at the next follow ing meeting of the Board of Directors, which may veto or overturn any committee action as to matters not yet performed or to which the corporation has not been obligated by contract by a three fourths (3/4) vote of Directors present at a Board of Directors meeting in which, at least, a quorum is established
Form 990, Part VI, Line 11b Form 990 Review Process	The audit review committee is given a draft of the 990 to review before it is finalized and published. The audit review committee reports to the full board. A copy of the form is provided to the board prior to filing.
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	LWI makes a point of not having board members where there is a clear and obvious conflict of interest. Each year board members are handed a document describing the conflict of interest policy and are instructed to read and sign and return it declaring that there is no conflict of interest.
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Executive Committee of the Board of Directors, without the President & CEO present, sets the salary of the President & CEO on an annual basis. Comparable data from several sources providing local, regional and national non-profit salary surveys is reviewed. The committee determines the President & CEO's annual salary based upon this data and a performance evaluation.
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	As a part of the annual budget process, the salaries of officers and key employees are compared to available data from non-profit salary surveys The HR department provides recommended salaries based upon this data and performance evaluations to the President & CEO for approval Once approved these salaries are part of the overall budget that is review ed and approved by the Board of Directors
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Audited financial statements are published on our website Governing documents and conflict of interest policy are provided upon request

efile GRAPHIC print - DO N	OT PROCESS As Filed Data -					DLN: 93493189014044
SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	OMB No 1545-0047 2013 Open to Public Inspection					
Name of the organization Living Water International					Employer i 76-03248	dentification number
Part I Identification of	Disregarded Entities Complete	f the organization	answered "Yes" or	n Form 990, P		, ,
(a) Name, address, and EIN (If app		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
	Related Tax-Exempt Organizat x-exempt organizations during the		the organization ar	nswered "Yes'	' on Form 990, Pa	art IV, line 34 because it had one

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	512(b)
						Yes	No
See Additional Data Table						_	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y		Schedule R (Forn	1 990) 2	013

Schedule R (Form 990) 2013

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. (i) (k) (a) (b) (c) (d) (e) (f) (g) (h) (j) Name, address, and EIN of Primary activity Legal Direct Predominant Share of Share of Disproprtionate Code V-UBI General or Percentage related organization controlling income(related, total income end-of-year allocations? amount in box ownership domicile managing (state or entity unrelated, assets 20 of partner? foreign excluded from Schedule K-1 country) tax under (Form 1065) sections 512-514) Yes No Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Page **2**

Schedule R (Form 990) 2013

Par	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b	Yes	
с	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e	\square	No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i	\square	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	\square	No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I I	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	n Yes	
n s	Sharıng of facılıtıes, equipment, mailing lists, or other assets with related organization(s)	1n		No
ο	Sharing of paid employees with related organization(s)	10	\square	No
р	Reimbursement paid to related organization(s) for expenses	1p	Yes	+
q	Reimbursement paid by related organization(s) for expenses	1q	\vdash	No
r	O ther transfer of cash or property to related organization(s)	1r	┼──	No
s	Other transfer of cash or property from related organization(s)	1s		No

Part VI Unrelated Organizations Taxable as a Partnership Complete of the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

				_									
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e)(f)Are all partners sectionShare of total501(c)(3) organizations?income		(g) Share of end-of-year assets	(h) Disproprtiona allocations	ate	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1 1	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference

Explanation

Schedule R (Form 990) 2013

Software ID: 13000170 **Software Version:** 2013v3.1 **EIN:** 76-0324875 Name: Living Water International

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (a) (b) (c) (d) (e) (f) (g)									
(a) Name, address, and EIN of related organization	(D) Primary activity	(C) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(T) Direct controlling entity	(g) Section 512 (b)(13) controlled entity? Yes No			
(1) Living Water Service Centre	Charitable	KE	501(c)(3)	7	Lıvıng Water International	Yes NO			
Kund Road 58 Nairobi, Africa 00100 KE					International				
(1) Living Water International	Charitable	BY	501(c)(3)	7	Lıvıng Water International	Yes			
999 Avenue Pierre Ngendandumwe BP Bujumbura, Africa BP 5202 BY									
(2) Living Water International Zambia	Charitable	ZA	501(c)(3)	7	Lıvıng Water International	Yes			
Sıgırı Vıllas Plot No 259b Lusaka, Afrıca ZA									
(3) Foundation Living Water	Charitable	НА	501(c)(3)	7	Lıvıng Water International	Yes			
3 Lilavois 33 3 Route Prolongee Crois-des-Bouquets HA									
(4) Living Water International Canada	Charitable	СА	501(c)(3)	7	Lıvıng Water International	Yes			
42 Calder Cres Whitby, Ontario L1N6M3 CA									
(5) Living Water International	Charitable	LI	501(c)(3)	7	Lıvıng Water International	Yes			
Tower Hill PO Box 1279 Monrovia LI									
(6) LW Internacional AC Puebla MX	Charitable	МХ	501(c)(3)	7	Lıvıng Water International	Yes			
37 Melchor O campo Momoxpa, Puebla MX									
(7) Living Water International Rwanda	Charitable	RW	501(c)(3)	7	Lıvıng Water International	Yes			
Nyarutarama Kıgalı BP6712 RW									
(8) Living Water International Sierra Leone	Charitable	SL	501(c)(3)	7	Lıvıng Water International	Yes			
New Steps Ctr Waterloo Hwy Waterloo, Koya Rural Dist SL									
(9) LWI Uganda	Charitable	UG	501(c)(3)	7	Lıvıng Water International	Yes			
Block 244 Plot 5504 Heritage Kampala UG									
(10) Living Water International	Charitable	NU	501(c)(3)	7	Lıvıng Water Internatıonal	Yes			
Parque Arlan Siu 100mts Abajo, Managua NU									
(11) Living Water International India	Charitable	IN	501(c)(3)	7	Lıvıng Water International	Yes			
12 Bungalow Cantt Varanası 221002 UP IN									
(12) Living Water Central	Charitable	IN	501(c)(3)	7	Lıvıng Water International	Yes			
1-59/3/E Masjid Banda Kondapur,Hyderbad 500032 IN									
(13) Living Water South	Charitable	IN	501(c)(3)	7	Lıvıng Water International	Yes			
Thalappal a Malayıl House West Othera, Kerala IN									
	1		I	Ι	1	I			

(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
Living Water Service Centre	b	1,967,591	Cash
Living Water Service Centre	р	46,038	Cash
Lıvıng Water International Zambia	b	413,533	Cash
Living Water International Zambia	p	211,447	Cash
Foundation Living Water	b	1,125,065	Cash
Foundation Living Water	р	171,206	Cash
Living Water International	b	1,070,876	Cash
Living Water International	р	179,488	Cash
LW Internacional AC Puebla MX	b	613,910	Cash
Lıvıng Water International Rwanda	b	976,091	Cash
Living Water International Sierra Leone	b	555,664	Cash
LWI Uganda	b	1,171,473	Cash
LWI Uganda	р	29,726	Cash
Living Water International	b	1,372,359	Cash
Living Water International India	b	344,516	Cash
Living Water Central	b	296,882	Cash
Living Water South	b	317,341	Cash

Form 990, Schedule R, Part V - Transactions With Related Organizations