Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

ONB No 1545.0047

Pon to Dubli

Department of the Treasury Internal Revenue Service(72)

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

Open to Public Inspection

Α	\ Fo	or the 2007 calen	dar year.	or tax year beginning	2007 a	nd ending			*
Е		eck if applicable:		Ic	, 2007, 0	na enang	TD = .		
		Address change	Please use IRS label		national		1	oyer identificat	
	-	Name change	or print	PO Box 2257	ideronar			-032487	5
	-	Instract return	or type. See	Sugar Land, TX 774	37-2257		E Telepi	hone number	
	-	i I	specific Instruc-		- 1000 0000 1000 1		281	<u>L-207-78</u>	800
	-	Termination	tions,				F Accou	inting od;	Cash X Acen
	-	Amended return	L					ے • Diher (specify)	3
	L	Application pending	Section	on 501(c)(3) organizations and	4947(a)(1) nonexempt	H and Lare not appli	cable to sec	tion 527 organi	izations
			. Charn (Form	able trusts must attach a com 1990 or 990-EZ).	pleted Schedule A	H (a) is this a grou	ip return for	athliates?	Yes X
G	We	b site: * www.				H (b) If Yes, ente			
			nace.			H (c) Are all athlic	ites included	17	Yes
J	Org (ch	ganization type leck only one)	▶	X 5343		1		instructions.)	
K					.) 4947(a)(1) or 52	H (d) Is this a sepa	state retuin t	lifed by an	
* `	arc	oss receipts are r	nne organi normally r	zation is not a 509(a)(3) supp not more than \$25,000. A retur	orting organization and its			group rubng?	Yes X
	ÕIÇ	janization choose	es to file a	a return, be sure to file a comp	ir is not required, but it th dete return.	- CATOUR CA	emption 1	Vumber	>
Ī.		···		o, 9b, and 10b to line 12 1		M Check >	L if the c	organization is	not required
	art	Revenue	Evnon	5, 90, and rub to line 12 1	1,935,680.	to attach Sch	nedule B (Fo	rm 990, 990-E	Z, or 990-PF).
1.	1		cutto and	ses, and Changes in Ne	t Assets or Fund Bal	lances (See the	instruc	tions.)	
	'			nts, and similar amounts rece		1			
		a Continuutions	to donor a	advised funds		1 a			
		o Direct public s	upport (n	ot included on line 1a)		16 10,936,	377.	and the same of th	
		c indirect public	support ((not included on line 1a)		1 c			
	-	6 Government of e Total (add lines)	ontributio:	ns (grants) (not included on lir	ne 1a)	1d 715,	257.	100 A	
		la through 1d) (cas	sh \$	10,950,448. noncash \$	701,186.	b		1e 1:	1,651,634
		9		a morading dovernment ices o	ing compacts (nominall v	n, nne 93)	1	2	40,415
	3	Membership di	ues and a	ssessments		*************		3	
	4	Interest on sav	rings and	temporary cash investments.		*******		4	61,577
	5	Dividends and	interest f	rom securities				5	
				************************			843.		
							777.		
		c Net rental inco	me or (lo	ss). Subtract line 6b from line	6a			6 c	42,066.
R	7	Other investme	ent incom	e (describe			_) [7	
REVENU	8	a Gross amount :	from sale	s of assets other	(A) Securities	(B) Other			
N		than inventory.			9,971. 8	Ва			
Ē				and sales expenses		3 b			
)Statement.1.		3 c			
		d Net gain or (los	ss). Comb	ine line 8c, columns (A) and (В)			8 d	9,971.
	9	opecial events	and activ	ities (attach schedule), If any	amount is from gaming, c	:heck here 🟲			
		a Gross revenue	(not inclu	ding \$ 1,703,89	1. of contributions	1			
	1	b Less: direct exe	z IU)	her than fundraising expenses		63,			
						68,	307.		
	10 =	Force color of i	inuss) iiuli	n special events. Subtract line	TO HOM line ya	. Statement	2 9	Эс	-5,067.
	100	a Gross sales of a	mivernory,	less returns and allowances.		a		and the same of th	
		Cress, cost or go	ous solu.			b		1000	
	11	Other remember (1922	i) irom sales	of inventory (attach schedule), Subtra	ict line 10b from line 10a		10) c	
	12	Total revenue (nom Pari	VII, line 103)	*********************		11		
	13	Program canda	400 lines	le, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10	C, and 11	amempia artical CN + a + F + D & Society	12	11,	,800,596.
E		Managaria Service	es (from fi	ne 44, column (B)) I (from line 44, column (C))		13.5.5.5.5.	13	7,	,614,250.
EXPENSES	14	wanayement an	iu generai	(from line 44, column (C))			14		544,857.
N S	15 16	Payments to	m line 44	, column (D))tach schedule)	······································		15		987,251.
Ĕ	17	Total average	mates (at	rach schedule)		orani (K. K. 1994) Marijana (K. 1922) Marijana (K. 1924) Marijana (K. 1924) Marijana	16		
\dashv		Funda expenses.	Add line:	s 16 and 44, column (A)			17	9,	146,358.
A S	18	Excess of (defic	II) for the	year. Subtract line 17 from lin	ne 12	******	18		654,238.
Š	19	ivet assets or fur	nd balanc	es at beginning of year (from	line 73, column (A))	Andreas and the second	19		818,962.
ASSETS	20	Other changes in	n net asse	ets or fund balances (attach e	(planation),		20		
-1	21	ivet assets or fur	nd balanc	es at end of year. Combine lir	ies 18, 19, and 20	<u></u>	21	5.	473.200

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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B). (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See instruct.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach sch)		economies de la constitución de		1	
(cash \$	- Composition of the Composition				
non-cash \$	especial and a second				
If this amount includes					
foreign grants, check here	. 22a				
22 b Other grants and allocations (att sch) (cash \$					
(cash \$					
If this amount includes	01 Arrange (1997)				
foreign grants, check here	22 b				
23 Specific assistance to individuals					
(attach schedule)	. 23				
24 Benefits paid to or for members (attach schedule)	. 24	Targital de la constante de la			
25 a Compensation of current officers,	. 24		77-102		
directors, key employees etc. listed					
in Part V-A	. 25 a	457,474.	236,626.	103,737.	117,111
b Compensation of former officers, directors, key employees, etc. listed					
in Part V-B	. 25 b	0.	0.	0.	^
c Compensation and other distributions not			0,	U ,	0
included above, to disqualified persons (as defined under section 4958(1)(1)) and persons	and the second				
described in section 4958(c)(3)(B)					
	25 c	0.	0.	0.	0
26 Salaries and wages of employees not included on lines 25a, b, and c	26	955,290.	492,716.	215 25	
27 Pension plan contributions not		223,220.	452,710.	215,256.	247,318
included on lines 25a, b, and c	27			to you to be a second or to be	
28 Employee benefits not included on					
lines 25a - 27	28	31,960.	16,531.	7,247.	8,182
29 Payroll taxes	29	79,133.	42,336.	19,309.	17,488
30 Professional fundraising fees	30				27,100
31 Accounting fees	31	21,049.		21,049.	
32 Legal fees		18,659.		18,659.	
33 Supplies		354,193.	297,595.	22,076.	34,522
34 Telephone	34	57,817.	41,437.	5,776.	10,604
35 Postage and shipping36 Occupancy		306,998.	84,353.	3,022.	219,623.
37 Equipment rental and maintenance	36	38,609.	23,693.	7,025.	7,891.
38 Printing and publications	38	148,670. 193,567.	123,152.	14,539.	10,979.
39 Travel	39	961,360.	23,352. 886,205.	4,837.	165,378.
40 Conferences, conventions, and meetings	40	201,300.	000,203.	4,856.	70,299.
41 Interest	41	42,727.		42,727.	
42 Depreciation, depietion, etc (attach schedule)	42	85,846.	47,281.	19,424.	19,141.
43 Other expenses not covered above (itemize):				10,121.	17,141.
aSee Statement 3	43a	5,393,006.	5,298,973.	35,318.	58,715.
b	43 b				
C	43 c				
de	43 d				
f	43e				
'g	43 f 43 a				
	43 g				
14 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) · (D), carry these totals to lines 13 · 15)	44	9,146,358.	7,614,250.	544,857.	987,251.
pint Costs, Check. if you are following	SOP 98-2		3-77-7-38-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-		
e any joint costs from a combined education	al campai	gn and fundraising solid	citation reported in (B)	Program services?	Yes X No
'Yes,' enter (i) the aggregate amount of these	ioint cos	ts \$	· (ii) the am	ount allocated to Progra	

lf

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Mhat is the eigenization's mi			,
All organizations must describ	thary exempt purpose? *	Provide clean water and aid	Program Service Expense
clients served, publications issu	ied, etc. Discuss achievements	evements in a clear and concise manner. State the number of that are not measurable. (Section 501(c)(3) and (4) organalso enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) organizations and
22attoris and 4947(a)(1) nones	xempt charitable trusts must a	also enter the amount of grants and allocations to others.)	4947(a)(1) trusts; but optional for others.)
a <u>See Statement</u> 4	1		
~			
The same and the same area and the same area.			The second secon
(Carala a 3 11 12			
(Grants and allocations	\$) If this amount includes foreign grants, check here 🕨	7,614,250.
p			
			THE POST OF THE PO
~			
(Grants and allocations	\$) If this amount includes foreign grants, check here 🕨	
c			
(Grants and allocations	\$) If this amount includes foreign grants, check here	
d	·		
	·		
(Grants and allocations			
	• • • • • • • • • • • • • • • • • • • •) If this amount includes foreign grants, check here ▶	
(Grants and allocations		1	
) If this amount includes foreign grants, check here	
· rotar or Frogram Service	= Exherises (2000)0 equal line	e 44. column (B), Program services).	7,614,250.

BAA

Form 990 (2007)

Part IV | Balance Sheets (See the instructions.) Note: Where required, attached schedules and amounts within the description (B) End of year (A) column should be for end-of-year amounts only. Beginning of year Cash – non-interest-bearing. 610,206 735,515. 45 Savings and temporary cash investments.... 1,841,510 1,254,427. 46 47 a Accounts receivable..... 47 a 133,821 47 b 62,100 47 c 133,821. 48 a Pledges receivable..... 48 a 791,604 b Less: allowance for doubtful accounts...... 48 b 542,001. 48 c 791,604. 49 Grants receivable..... 49 50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) 50 a b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)..... 50 b 51 a Other notes and loans receivable (attach schedule) See .St. 5. 512 336,768. b Less: allowance for doubtful accounts 51b 390,380 51 c 336,768. 52 Inventories for sale or use..... 76,099 52 181,217. 53 Prepaid expenses and deferred charges..... 2,638 53 81,378. 54a Investments — publicly-traded securities..... Cost FMV 54 a b Investments - other securities (attach sch)...... Cost FMV 54 b 55 a Investments - land, buildings, & equipment: basis... b Less: accumulated depreciation 55 b 55 c Investments — other (attach schedule) 56 57a Land, buildings, and equipment: basis...... 3,172,640 57 a b Less: accumulated depreciation (attach schedule) Statement .6... 57 b 247,704 275,304 2,924,936. 57 c 58 Other assets, including program-related investments (describe ► See Statement 7 2,500 58 6,140. 59 Total assets (must equal line 74), Add lines 45 through 58. 3,802,738 6,445,806. 59 Accounts payable and accrued expenses..... 60 183,821 580,893 60 61 61 62 Deferred revenue 258,219 62 Loans from officers, directors, trustees, and key employees (attach schedule) 63 64a Tax-exempt bond liabilities (attach schedule) 64 a T - E 5 b Mortgages and other notes payable (attach schedule)......See. Statement.8..... 541,736. 391,713. 64 h 65 Other liabilities (describe ►..____ 65 Total liabilities. Add lines 60 through 65. 983,776 66 972,606. Organizations that follow SFAS 117, check here X and complete lines 67 ZUT. through 69 and lines 73 and 74. 67 Unrestricted..... 1,879,849 67 4,010,133. ASSETS Temporarily restricted..... 939,113. 1,463,067. 68 Permanently restricted 69 Organizations that do not follow SFAS 117, check here and complete lines O R 70 through 74. FUND 70 Capital stock, trust principal, or current funds..... 70 Paid-in or capital surplus, or land, building, and equipment fund..... 71 Retained earnings, endowment, accumulated income, or other funds..... 72 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)...... 2,818,962 73 5,473,200. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73. 3,802,738. 74 6,445,806.

Fo	rm 990 (2007) Living Water In	ternational		76-	-03	24875 Page
P	art IV-A Reconciliation of Reven	ue per Audited Financia	al Statements wit	h Revenue per R	etur	n (See the
	instructions.)					
a	Total revenue, gains, and other suppor	t per audited financial statem	ents	***********	a	11,946,054
b	Amounts included on fine a but not on					
	1Net unrealized gains on investments		b1		-	
	2Donated services and use of facilities.	* * * * * * * * * * * * * * * * * * * *	b2	10,374.	.]	and the second s
	3Recoveries of prior year grants		b3		1	olygical and the second and the seco
	40ther (specify):				1	weeks and the second se
	See Stm 9		b4	135,084.		
	Add lines b1 through b4			200,001.	1 6	145,458
С	Subtract line b from line a					11,800,596.
d	Amounts included on Part I, line 12, bu				-	11,000,090.
	1 Investment expenses not included on F		41		-controlled	
	20ther (specify):				-	
			d2			
	Add lines d1 and d2				d	
e	Total revenue (Part I, line 12). Add line	s c and d			e	11 000 500
P	art IV-B Reconciliation of Expens	ses per Audited Financi	al Statements wi	th Evnences nor	D of	11,800,596.
		oo por riddica i illaroi	ar otatements wi	ar Expenses her	Tell	urii.
а	Total expenses and losses per audited	financial statements				0 001 016
b	Amounts included on line a but not on I	Part I line 17:			a	9,291,816.
	1Donated services and use of facilities		61	10 274		
	2Prior year adjustments reported on Part			10,374.	-	
	3Losses reported on Part I, line 20				-	
					1 1	
	Coo C+m+ 10		1 1	125 004		
	Add lines b1 through b4	. Which below which were recent parties having which which depth about March Balan as		135,084.	-	2 4 5 4 5 0
C	Subtract line b from line a				b	145,458.
d	Amounts included on Part I, line 17, but				C	9,146,358.
u			1 ,.1			
	1 Investment expenses not included on P 20ther (specify):					
	Add lines d2 and d2	which have being story more and story topic than being their man and the contract of	<u> d2</u>			
^	Add lines d1 and d2				d	
P :	Total expenses (Part I, line 17). Add line t V-A Current Officers Director				е	9,146,358.
	or key employee at any time du	ring the year even if they we	re not compensated.)	(See the instructions	.)	cer, director, trustee,
	783 N	(B) Title and average hours per week devoted	(C) Compensation (if not paid,	(D) Contributions employee benefi		(E) Expense
	(A) Name and address	to position	enter -0-)	plans and deferre	ed	account and other allowances
				compensation plan	ns	
_			400 074			
<u>e</u>	e Statement 11		423,874	. 33,60	0.	0.
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		And Control of the Co				
_		The Colonial Colonia				
_			100000		\neg	

Form 990 (2007) Living Water Internat	ional		76-03248	75	ſ	Page	
Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)							
75 a Enter the total number of officers, directors, and trustees (permitted to vote on organiza	tion business at board meeting	as ► 12		Yes	No	
b Are any officers, directors, trustees, or key en listed in Schedule A, Part I, or highest compe A, Part II-A or II-B, related to each other throu identifies the individuals and explains the rela	nsaled professional an	d other independent co	ntractors listed in Schedul	es e 75b	X	Name of the Particular State o	
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of legislation and the latest as exempt or taxable, that are related							
If 'Yes,' attach a statement that includes the in	nformation described in	the instructions.	**********	₹ 75 c	 	X	
d Does the organization have a written conflict of	of interest policy?			. 75 d	v		
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, direct during the year, list that person below the instructions.)	stees, and Key En	iployees That Received company	eived Compensation	or Othe	er	/) e	
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allowa		ther	
None			Table Addition plans				
					·		

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		THE PARTY OF THE P					
		or constitution of the con	O STATE OF THE STA				
		A management of the control of the c					
Part VI Other Information (See the instr	uctions)		The state of the s				
76 Did the organization make a change in its activ		advoting activities?		T	Yes	No	
If 'Yes,' attach a detailed statement of each ch	ange			. 76		X	
77 Were any changes made in the organizing or g	overning documents bi	ut not reported to the IR	RS?,			Χ	
If "Yes," attach a conformed copy of the change				4.5		*	
78a Did the organization have unrelated business g b If 'Yes,' has it filed a tax return on Form 990-T					X		
79 Was there a liquidation, dissolution, termination			* * * * * * * * * * * * * * * * * * * *		X		
year? If 'Yes,' attach a statement	i, or substantial contra	ction ouring the		79	*** *** 1	X	
80 a Is the organization related (other than by associatements), governing bodies, trustees, office	rs, etc, to any other ex	or nationwide organiza empt or nonexempt org	tion) through common anization?	80 a		x	
b If 'Yes,' enter the name of the organization ►					*	-	
813 Enter direct and indirect addition	and che	eck whether it is ex	empt or nonexempt.				
81 a Enter direct and indirect political expenditures.				4	or designations		
b Did the organization file Form 1120-POL for this BAA	s year?			81 b		<u>X</u>	
** ** *				Form 9	90 (2	.007)	

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Part VI Other Information (continued)			7	citie
82 a Did the organization receive donated services or the use of materials, equipment, or facilities a substantially less than fair rental value?			Yes	N
bilf 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		82 a	X	
83 a Did the organization comply with the public inspection requirements for returns and exemption	applications?	02-	v	
billio the organization comply with the disclosure requirements relating to auid pro aug contributi	nns 2		X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		33 D 34 a	<u>^</u>	Х
b If 'Yes,' did the organization include with every solicitation an express statement that such cont not tax deductible?	ributions or gifts were			
65 a 307(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		34 b	N/	
biblid the organization make only in-house lobbying expenditures of \$2,000 or less?		35 a 35 b	N/	
If Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the waiver for proxy tax owed for the prior year.	organization received a	שט	14	<u>A</u>
c Dues, assessments, and similar amounts from members	c N/A			
d Section 162(e) lobbying and political expenditures	d N/A			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	e N/A		***************************************	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	f N/A	-	Vienna Para	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f2		5 a	N	Α.
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable dues allocable to nondeductible lobbying and political expenditures for the following tax year?	estimate of	5h	N/Z	
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12		3111		7
b Gross receipts, included on line 12, for public use of club facilities	24/ 21			
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders	14/11			. ,
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).	49/11	-		
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corp	oration or partnership,		are the second second second	
p. 1 - 2 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		}a		Х
b At any time during the year, did the organization, directly or indirectly, own a controlled entity wis section 512(b)(13)? If 'Yes,' complete Part XI.	№ 89	th.		Х
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under		1	+	
section 4911 ► 0. ; section 4912 ► 0. ; section 4955	0.			
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess b during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yee explaining each transaction.	s,' attach a statement	*	manusconomics community	. ,
		D		<u>X</u> _
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.	· 0.			
d Enter: Amount of tax on line 89c, above, reimbursed by the organization	0			
e All organizations. At any time during the tax year, was the organization a party to a prohibited ta	shelter transaction? 89	e	1	Z
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insura	ance contract? 89	1		<u>-</u>
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did organization, or a fund maintained by a sponsoring organization, have excess business holdings	the supporting at any time during			
the year?	1.00	9	<u> </u>	
				_
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	Lan	ľ	_	
Jia the books are in care of ► Emison Lewis, CPA Telephone number	► 201_207 7000			8
Located at PO BOX 2257 Sugar Land TX	ZIP + 4 ► 77487-2	257		
b At any time during the calendar year, did the organization have an interest in or a signature or off financial account in a foreign country (such as a bank account, securities account, or other financial to the country of the cou	ner authority over a al account)?	Yes	No X	
If it es, enter the name of the foreign country		+	t^	
See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Forei Financial Accounts.	gn Bank and	ACCOUNT AND ACCOUN		

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Part VI Other Information (continue	ed)				Yes No
$oldsymbol{c}$ At any time during the calendar year, did	I the organization	maintain an office	e outside of the Un	ited States?	91c X
If 'Yes,' enter the name of the foreign count	ry •	Person below house below along desire haven plant			
92 Section 4947(a)(1) nonexempt charitable	r trusts filing Form	1 990 in lieu of Fo	<i>rm 1041</i> – Check i	iere	N/A 🟲 📗
and enter the amount of tax-exempt inte				> 92	N/A
Part VII Analysis of Income-Produc	ing Activities	(See the instru	ıctions.)		
	Unrelated bus	siness income	Excluded by sect	ion 512, 513, or 514	(E)
Note: Enter gross amounts unless otherwise indicated.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue:			and the second s		
a Training fees					40,415.
b					
С					
d					
е					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invents.			14	61,577.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:			1	40.050	
a debt-financed property			16	42,066.	***************************************
b not debt-financed property					
98 Net rental income or (loss) from pers prop 99 Other investment income			<u> </u>		
100 Gain or (loss) from sales of assets other than inventory	The state of the s		18	9,971.	
101 Net income or (loss) from special events			16	-5,067.	
102 Gross profit or (loss) from sales of inventory				3,007.	
103 Other revenue: a		The state of the s			
b					
С					
d					
e					
Subtotal (add columns (B), (D), and (E))				108,547.	40,415.
105 Total (add line 104, columns (B), (D), a	and (E))		,		148,962.
Note: Line 105 plus line 1e, Part I, should equ.				**************************************	
Part VIII Relationship of Activities to	the Accompl	ishment of Ex	empt Purposes	(See the instruct	ions.)
Line No. Explain how each activity for which of the organization's exempt purpo	n income is report ises (other than b	ed in column (E) y providing funds	of Part VII contribu for such purposes)	ted importantly to the	accomplishment
93a Living Water Internati	onal conduc	ts training	g seminars co	overing variou	s aspects of
Integrated Water Solut	ions. Cours	ses are offe	ered at vario	ous training s	ites
throughout the United	States. Fe	es are chai	ged to offse	et the cost of	the
seminars.					
Part IX Information Regarding Taxa	able Subsidiar	ies and Disrec	jarded Entities	(See the instruction	ons.)
(A)	(B)	(0	;)	(D)	(E)
Name, address, and EIN of corporation,	Percentage of	Nature of	activities	Total	End-of-year
partnership, or disregarded entity	ownership interest			income	assels
N/A	%				
	0/0				
	0,0				
Dort V. Information Describer T	% >s{a+a A a a a sia	tod with Dane	anal Panatit C	ntracte (Car III	(m. = 1
Part X Information Regarding Tran					person normalization and the second
a Did the organization, during the year, receive any fun					Yes X No
b Did the organization, during the year, pay	•	-	i a personai peneti	COUNTACT!	Yes X No
Note: If 'Yes' to (b), file Form 8870 and For	111 4720 (SEE IIISU	uclivits).	wanter and a second	TECANOR ACCIONA	Form 990 (2007)

Par	t XI Information Regarding Transfers To a organization is a controlling organization	nd From Controlled En on as defined in sectior	ntities. Complete only if th n 512(b)(13).	e
				Yes No
106	Did the reporting organization make any transfers to 'Yes.' complete the schedule below for each controlle	a controlled entity as defined entity	d in section 512(b)(13) of the Co	ode? If
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
C				
	Totals			
107	Did the reporting organization receive any transfers to 'Yes.' complete the schedule below for each controlled	from a controlled entity as de	efined in section 512(b)(13) of th	Yes No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
С				
	Totals	K of the second		
108	Did the organization have a binding written contract annuities described in question 107 above?	in effect on August 17, 2006,	covering the interest, rents, roy	alties, and X
Plea Sign Here	Signature of officer	turn, including accompanying schedule ifficer) is based on all information of w	es and statements, and to the best of my kninch preparer has any knowledge. S-/44 Date	
Paid Pre- pare Use Only	r's Fum's name (or Syours it self-employed). 2900 Weslayan, Suite	200	Self-	
BAA	· · · · · · · · · · · · · · · · · · ·			Form 990 (2007)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

2007

OMB No. 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Name of the organization				Employer identification	number
Living Water International				76-0324875	
Part I Compensation of the Five High	ghest Paid Employee:	s Oth	er Than Officers	, Directors, an	d Trustees
(See instructions, List each or	ne. If there are none,	<u>enter</u>	'None.')		
(a) Name and address of each employee pard more than \$50,000	(b) Title and average hours per week devoted to position		(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Stan Patyrak					
P.O. Box 2257 SugarLand, 77487	Development	45	58,784.	4,800.	0.
Paul Darilek					1
same as above,	Development	45	54,922.	4,800.	0.
John Nadolski					
same as above,	Program Dir	45	53,487.	4,800.	0.
Total number of other employees paid over \$50.000.		0			
Part II — A Compensation of the Five Hig (See instructions. List each or	hest Paid Independe	nt Co	ntractors for Pr	ofessional Sen	vices
			illis). Il tilete al	e none, enter i	vone.)
(a) Name and address of each independent contr	actor paid more than \$50,0	00	(b) Type o	of service	(c) Compensation
Quadriga Art Inc.					
30 E. 33rd St New York, NY 10016	ATTEN ATTEN AUTON MATER STATES ATTENDED ATTENDED ATTENDED ATTENDED ATTENDED ATTENDED ATTENDED ATTENDED ATTENDED		Marketing		310,955.
Takal mark and allows					
Total number of others receiving over \$50,000 for professional services		0			
Part II $-B$ Compensation of the Five Hig	hest Paid Independer	nt Coi	ntractors for Otl	ner Services	
(List each contractor who performs. If there are none, enter			professional serv	rices, whether i	ndividuals or
(a) Name and address of each independent contra	actor paid more than \$50.0	00	(b) Type o	f service	(c) Compensation
Sterling Electrical Services					
935 Eldridge Rd, Ste 174 Sugar La	nd, TX 77478		Contractor		105,884.
Kirtley Sheet Metal	and these water were years your man and water and the same terms.				
14830 Boudreaux Rd Tomball, TX 77	377		Contractor		102,100.
				- Principles	
				negoria-deposition	
otal number of other contractors receiving		٦		1,	

Pa	Statements About Activities (See instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid	T		
	or incurred in connection with the lobbying activities > \$ N/A			
	(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.).	1		Х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
	See Statement 14			
-	a Sale, exchange, or leasing of property?	2 a		Χ
		20		
	b Lending of money or other extension of credit?	2 b		Х
(c Furnishing of goods, services, or facilities?	2 c		X
	See Form 990, Part V			
(d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d	_ X	
6	e Transfer of any part of its income or assets?	2 e		Х
		26		
J	a Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments.).	3 a		X
ab.d	b Did the organization have a section 403(b) annuity plan for its employees?	3 b	Withouthouthouth	Х
C	c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement			,,
	. See all seed a detailed statement	3 c		<u>X</u>
c	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3 d	***************************************	Х
4 a	a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines	-		
	4f and 4g	4 a		<u>X</u>
b	b Did the organization make any taxable distributions under section 4966?	4 b	N	<u>A</u>
C		a-quella que	-	
	Did the organization make a distribution to a donor, donor advisor, or related person?	4 c	NY.	<u>A</u>
d	d Enter the total number of donor advised funds owned at the end of the tax year ▶	~~~~~	1	I/A
е	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		1	1/A
ŧ	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts.			0
g	g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ►			0.

Logit			Foundation Status (See instructions.) (Please check only ONE a	nolicable ha		
5			•		ррисавіе во	X.)	
				s. Section 170(b)(1)(A)(i).			
6			(Also complete Part V.)				
7	A hespital or a coop	erative hospita	Lservice organization, Ser	ction 170(b)(1)(A)(iii).			
8	A federal, state, or I	ocal governmer	nt or governmental unit. S	Section 170(b)(1)(A)(v).			
9	A medical research and state ►	organization op	perated in conjunction with	n a hospital. Section 170(b)	(1)(A)(iii). E	Inter the hosp	pital's name, city,
10	An organization ope (Also complete the \$	rated for the be Support Schedi	enefit of a college or unive ule in Part IV-A.)	ersity owned or operated by	/ a governm	ental unit. Se	ection 170(b)(1)(A)(iv)
11 a	An organization that Section 170(b)(1)(A)	normally receiv (vi). (Also com	ves a substantial part of it plete the Support Schedu	ts support from a governme ule in Part IV-A.)	ental unit or	from the gen	eral public.
11 b	A community trust. S	Section 170(b)(1)(A)(vi). (Also complete t	the Support Schedule in Pa	art IV-A.)		
12	from gross investmen	d to its charitat nt income and	ole, etc., tunctions — subje unrelated business taxabl	% of its support from contri cot to certain exceptions, ar e income (less section 511 o complete the Support Sc	nd (2) no mo tax) from h	ore than 33-1/	13% of its support
13	An organization that	is not controlle	ed by any disqualified pers	sons (other than foundation bes the type of supporting o	managers)	and otherwis	e meets the
	Type I	Туре II	Type III-Functio	onally Integrated	Type III	l-Other	
		Provide the	T	out the supported organiz	T		
	(a) Name(s) of suppor organization(s)		(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the si organization the sup organiz gove docun		(e) Amount of support
					Yes	No	
						200	
							and the second s
Total						b	0.
							0.
BAA	An organization orgai	nized and oper	ated to test for public safe	ety. Section 509(a)(4). (See			990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 Living Water International Page 4 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

15 Calls, organity, and confidentiality (15 15 15 15 15 15 15 15	begi	ndar year (or fiscal year nning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
16 Moratherstrap fees received.	15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	7,080,409.	5,754,806.	3,309,669.	4,176,519.	20,321,403.
meschandise solid in services performed, or familiary of familiary and velocy that it related to the organizations of services of the properties of the organizations of the properties of the p	16	Membership fees received					}
18	17	merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's	22,538.	147,354.	299,761.	538,660.	1,008,313.
activates not included in line 18. 20 Tax revenues leviced for the organization's benefit and either paid to it or expended on its behalf. 21 The value of services or facilities furnished to the organization by a governmental unit viriout charge. Do not include the value of services or facilities generally furnished to the public without charge. 22 Other income. Attach a schedule. Do not include gian or doss) from sale of capital assets. 23 Total of times 15 through 22	18	amts recid from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired					
Comparison Com	19						0.
facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. Do not include the value of services or facilities generally furnished to the public without charge. 20 Other income, Attach a schedule, Do not include gain or (loss) from sale of capital assets. 21 Total of lines 15 through 22. 7,112,773. 5,902,359. 3,618,586. 4,720,710. 21,354,428. 24 Line 23 minus line 17. 7,090,235. 5,755,005. 3,318,825. 4,182,050. 20,346,115. 25 Enter 1% of line 23. 71,128. 59,024. 36,186. 47,207. 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. 26a 406,922. b Prepare a list for your records to show the name of and amount contributed by each person (either than 29 operanental unit or publicly supported organization) whose total gifts for 203 through 206 exceeded the amount shown in line 25a. Do not file this fist with your return. Enter the total of all these excess amounts. C Total support for section 509(s)(1) test: Enter time 24, column (e). 26b 1,123,078. 26c 20,346,115. d Add: Amounts from column (e) for lines: 18 24,712. 19 26 20,346,115. 26c 19,198,325. f Public support (line 26c minus line 26d total). 26 public support (line 26c minus line 26d total). 26 public support (line 26c minus line 26d total). 26 public support (line 26c minus line 26d total). 26 public support (line 26c minus line 26d total). 27 Organizations described on line 12: N/A a For amounts included in lines 15; 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amount received for each year, that was note than the larger of (1) the amount on line 26 for the year of (2) 15 public support (line 26c minus line 26d lotal). 27 (2005) (2004) (2003) b For any amount included in lines 15; 16, and 17 that was received from each person (other than disqualified persons), prepare a list for your records to show the name of, and total	20	organization's benefit and either paid to it or expended on its behalf					0.
schedule. Do not include gain or floss) from sale of capital assets. 23 Total of lines 15 through 22. 7,112,773. 5,902,359. 3,618,586. 4,720,710. 21,354,428. 24 Line 23 minus line 17. 7,090,235. 5,755,005. 3,318,825. 4,182,050. 20,346,115. 25 Enter 1% of line 23. 71,128. 59,024. 36,186. 47,207. 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. 26a. 406,922. b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organizations) whose total gifts for 2003 through 2005 exceeded the amount shown in line 25a. Do not file this list with your return. Either total of all these excess amounts. 26b. 27 June 26b. 27 June 26c. 20,346,115. 26c.	21	facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to					0.
24 Line 23 minus line 17	22	schedule. Do not include gain or (loss) from sale of					0.
25 Enter 1% of line 23	23	Total of lines 15 through 22	7,112,773.	5,902,359.	3,618,586.	4,720,710.	21,354,428.
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. c Total support for section 509(a)(1) test: Enter line 24, column (e). b 26b 1,123,078. c Total support (line 26c minus line 26d total). b 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	24	Line 23 minus line 17					20,346,115.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. c Total support for section 509(a)(1) test: Enter line 24, column (e). d Add: Amounts from column (e) for lines: 18	25	Enter 1% of line 23					
supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. C Total support for section 509(a)(1) test: Enter line 24, column (e). d Add: Amounts from column (e) for lines: 18		•			,		406,922.
d Add: Amounts from column (e) for lines: 18 24,712. 19 22 26b 1,123,078. 26d 1,147,790. e Public support (line 26c minus line 26d total) 26e 19,198,325. f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26e 19,198,325. f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f 94.36 8 27 Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person,' Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total 27d e Public support (fine 27c total minus line 27d total) 27e The larger of (1) the amount (2) total minus line 27d total) 27e	b	supported organization) whose total gifts f	or 2003 through 2006 excee	ded the amount shown in li	ne 26a. Do not file this lis	t with your	
e Public support (line 26c minus line 26d total). f Public support percentage (line 26e (numerator) divided by line 26c (denominator)). 27 Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total and line 27b total 27d e Public support (line 27c total minus line 27d total) 27d f Total support (line 27c total minus line 27d total) 27d	C	Total support for section 509(a)(1) test: Enter line 24,	column (e)		► 26c	20,346,115.
e Public support (line 26c minus line 26d total). f Public support percentage (line 26e (numerator) divided by line 26c (denominator)). 27 Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total and line 27b total 27d e Public support (line 27c total minus line 27d total) 27d f Total support (line 27c total minus line 27d total) 27d	d	Add: Amounts from column (e) for	or lines: 18	24,712.	19		1 1 1 5 5 5
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)). 26f 94.36 % 27 Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total and line 27b total 27d e Public support (line 27c total minus line 27d total) 27e f Total support (for each year from 1500 or 12 and 1500 or		5.1.	22		26b 1,123,0	/8. 26d	
27 Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total and line 27b total. 27d e Public support (line 27c total minus line 27d total). 27e 17 27c	e	Public support (line 26c minus lin	ie 26d total)			26e	19,198,325.
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2006) (2005) (2004) (2003) b For any amount included in tine 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your records to show the name of, and amount received and the larger amount described in (1) or (2), enter the sum of file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total				ed by line 26c (deno	minator))		94.30 %
bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total and line 27b total 27d e Public support (line 27c total minus line 27d total) 27e f Total support (specific Follow) (2) tests False separate from line 23 solumn (e) \$27t 27t		For amounts included in lines 15, name of, and total amounts recei	16, and 17 that were	received from a 'disc n, each 'disqualified p	qualified person,' preperson.' Do not file th	pare a list for your re is list with your retur	cords to show the n. Enter the sum of
bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) (2005) (2004) (2003) c Add: Amounts from column (e) for lines: 15 16 17 20 21 27c d Add: Line 27a total and line 27b total 27d e Public support (line 27c total minus line 27d total) 27e f Total support (specific Follow) (2) tests False separate from line 23 solumn (e) \$27t 27t		(2006)	(2005)	(2004)		(2003)	
	b	For any amount included in line 1 to show the name of, and amount \$5,000. (Include in the list organic After computing the difference be	7 that was received for the treceived for each year to the tree that was received in little that the tree that was received for each year.	rom each person (other, that was more that ines 5 through 11b, a ceived and the larger	ner than 'disqualified pan the larger of (1) the s well as individuals.) amount described in	persons'), prepare a le amount on line 25 le Do not file this list v (1) or (2), enter the s	list for your records for the year or (2) with your return. sum of these
		(2006)	(2005)	(2004)		_ (2003)	
	С	Add: Amounts from column (e) fo	r lines: 15	The state of the s	16	1 1	
		17	20		21	27c	
	ď	Add: Line 2/a total	an	d line 2/b total		<u>27 d</u>	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)). h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).							
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	1	Public support for Section 509(a)(2) iest. ⊏nier amount: Ze (numerator) diedd	non nne 23, column ad hy lina 27f (danan	(e) [4/1]	77~	
$\cdots \cdots = = \cdots = = = = = = = = = = = = = = =$	y h	Investment income percentage (Inte 2	ine 18, column (e) (ni	umerator) divided by	line 27f (denominato	r)) ≥ 27h	

²⁸ Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

uı	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
		447.43	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	. 31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)		- Province de la constante de	
		_		
	Does the organization maintain the following:	To a contract of the contract		,
	a Records indicating the racial composition of the student body, faculty, and administrative staff?b Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	. 32b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?			
	d Copies of all material used by the organization or on its behalf to solicit contributions?	. 32d		, 1.
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)	4		
		-		1
	Does the organization discriminate by race in any way with respect to:	and are selected to the select	,	15.5
	a Students' rights or privileges?	. 33a		
	b Admissions policies?	33b		
	c Employment of faculty or administrative staff?	. 33 c		***************************************
	d Scholarships or other financial assistance?	33 d		
	e Educational policies?	. 33e		
	f Use of facilities?	331		
	g Athletic programs?	. 33 g		
	h Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)	A-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0		
	a Does the organization receive any financial aid or assistance from a governmental agency?			
	b Has the organization's right to such aid ever been revoked or suspended?	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial	Peter Printerior de la companya del companya de la companya de la companya del companya de la co		
	nondiscrimination? If 'No,' attach an explanation.	35		

Pa	tt VI-A Lobbying E (To be comple	xpenditures by Elected ONLY by an eligible	cting Public Charitie organization that filed Fi	S (See instru orm 5768)	ictions.)				N/A
Che	eck - a If the organ	ization belongs to an aff	iliated group. Check 🕨	b If you	u checke	d 'a' and	'limitec	cont	trof provisions apply.
		Limits on Lobbying	•			Affiliat	(a) ed grou otals	ıp	(b) To be completed for all electing
-		n 'expenditures' means a		·			7(010		organizations
36	transcoping onpends								
37		lures to influence a legis					-		
38 39		tures (add lines 36 and 3							
40		expenditures expenditures (add lines 3							
41	Lobbying nontaxable a				40				
	If the amount on line 4		obbying nontaxable am						
	Not over \$500,000							• •	
	Over \$500,000 but not over \$1								
	Over \$1,000,000 but not over				41		х -	,	وره څخه اه د اخلال د څخه مه د او
	Over \$1,500,000 but not over								
	Over \$17,000,000	\$1,00	00,000				¥ .		
42					42				
43					43				
44	Subtract line 41 from tin				44				
****	Caution: If there is an .	amount on either line 43	or line 44, you must file	Form 4720.					
••	(Some organ	izations that made a sec	Averaging Period Unition 501(h) election do rethe instructions for line	not have to co	mplete a	n) II of the f	ive colu	ımns	below.
		-	Lobbying Expendit	ures During 4	-Year Av	veraging	Period		
	Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2006	(c) 2005	пейнофициалицы (насохоння выходы дво		(d) 004		(e) Total
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))						-		
47	Total lobbying expenditures								
48	Grassroots non- taxable amount						,		
49	Grassroots ceiling amount (150% of line 48(e))			r			*		
50	Grassroots lobbying expenditures					W-1-1			
***************************************		nly by organizations tha	l did not completé r'art				·		N/A
Durir atter	ng the year, did the orgar npt to influence public op	ization attempt to influe inion on a legislative ma	nce national, state or lo- atter or referendum, thro	cal legislation, ugh the use of	includin f:	g any	Yes	No	Amount
	Volunteers								
	Paid staff or manageme				-				
	Media advertisements.							\dashv	
	Mailings to members, le								
	Publications, or publishe Grants to other organiza								
	Direct contact with legisl								
	Rallies, demonstrations,					ì		-	
	Total lobbying expenditu							+	
	If 'Yes' to any of the above					,			
BAA	The manufacture of the second			······································			dule A	(Forn	n 990 or 990-EZ) 2007

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the	e reporting organization. Code (other than section	directly or in 501(c)(3)	ndirectly engage in a organizations) or in	any of the follows	ing with any other organization describiting to political organizations?	ped in secti	ion 50	1(c)
	fers from the reporting or			,	2	1	Yes	No
						51 a (i)	703	X
								X
b Other	transactions:							
(i) Sa	ales or exchanges of ass	ets with a r	ioncharitable exemp	t organization		b (i)		Χ
								X
						1		X
					*************************			X
						1		X
								X
								X
d If the a the go any tra	answer to any of the abounds, other assets, or ser	ve is 'Yes,' vices given	complete the follow by the reporting org how in column (d) the	ing schedule. Co janization. If the ne value of the o	olumn (b) should always show the fair organization received less than fair m goods, other assets, or services receive	market value	ue of	-11
(a) Line no.	(b) Amount involved		(c) noncharitable exemp		(d) Description of transfers, transactions, and			
N/A								
- 11/17	74							
		:						
		······································						
								·
		··········						

			AND THE PROPERTY OF THE PROPER					
describ	ped in section 501(ć) of t	he Code (o	iliated with, or relate ther than section 50	ed to, one or mor 1(c)(3)) or in sec	re tax-exempt organizations ction 527?	► Yes	X	No
un res,	' complete the following (a)	schedule:	(b)	was and the same a	(6)			
	Name of organization		Type of orga	anization .	(c) Description of relation	nship		
N/A						*		
LV / EL								

	CHARLES TOWNS TO THE TOWN THE							
								
	1100		A. 1811 W. 1812 W. 181					
T			:					
	AND THE RESIDENCE OF THE PARTY							
	The second secon							

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization		Employer identification number				
Living Water International		76-0324875				
Organization type (check one):		1.0 0023010				
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(<u>3</u>) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a 527 political organization	private foundation				
Form 990-PF	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a priva 501(c)(3) taxable private foundation	ate foundation				
Check if your organization is covered by the General F boxes for both the General Rule and a Special	Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) o Rule — see instructions.)	rganization can check				
General Rule — For organizations filing Form 990, 990-EZ, contributor. (Complete Parts I and II.)	or 990-PF that received, during the year, \$5,000 or more (in	money or property) from any one				
Special Rules -						
X For a section 501(c)(3) organization filing For 509(a)(1)/170(b)(1)(A)(vi) and received from amount on line 1 of these forms. (Complete	orm 990, or Form 990-EZ, that met the 33-1/3% support test any one contributor, during the year, a contribution of the g Parts I and II.)	of the regulations under sections greater of \$5,000 or 2% of the				
aggregate contributions or bequests of more	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)					
\$1,000. (If this box is checked, enter here the etc., purpose. Do not complete any of the Pa	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively					
religious, charitable, etc, contributions of \$5	,000 or more during the year.)	\$				
Caution: Organizations that are not covered by 990-PF) but they must check the box in the hea not meet the filing requirements of Schedule B	the General Rule and/or the Special Rules do not file Sched Iding of their Form 990, Form 990-EZ, or on line 2 of their Fo (Form 990, 990-EZ, or 990-PF).	ule B (Form 990, 990-EZ, or orm 990-PF, to certify that they do				

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Schedule B (Form 990, 990-EZ, or 990-PF) (20	or 990-PF) (2007)	7 or	990-F7	990.	(Form	В	Schedule
--	-------------------	------	--------	------	-------	---	----------

Name of organization

Page 1 of 2

of Part I

Living Water International

Employer identification number 76-0324875

Part	Contributors (See Specific Instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		- \$552,222. -	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$ <u>335,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$277,425.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$611,184.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$1,500,000.	Person X Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$250,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

of Part I

Living Water International

Page 2 of 2
Employer identification number

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Part I	Contributors (See Specific Instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ <u>250,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$800,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Noncash Property (See Specific Instructions.)

of 1

Name of organization

Living Water International

Employer identification number

76-0324875

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	11770 shs Drill Quip stock		
		\$611,184.	12/04/07
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		· - · - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
The second secon			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA	C.h	edule B (Form 990, 990-EZ	Ar 990 DEN (2007

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Living Water International

76-0324875

Statement 1 Form 990, Part I, Line 8 Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities

Gross Sales Price: Cost or Other Basis: 9,971.

0.

Total Gain (Loss) Publicly Traded Securities $\frac{\$}{\$}$ 9,971.

Total Net Gain (Loss) From Noninventory Sales \$ 9,971.

Statement 2 Form 990, Part I, Line 9 Net Income (Loss) from Special Events

Special Events		Gross Receipts	Less Contri- butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
Houston Gala DC Gala	Total	1,719,213. 47,921. \$ 1767134.	1,671,773. 32,121. \$ 1703894.	47,440. 15,800. \$ 63,240.	53,102. 15,205. \$ 68,307.	-5,662. 595. \$ -5,067.

Statement 3 Form 990, Part II, Line 43 Other Expenses

		(A) Total	(B) Program <u>Services</u>	(C) Management <u>& General</u>	(D) <u>Fundraising</u>
Contract labor Insurance Licenses/permits/dues Other Expenses Other professional Water delivery projects	Total <u>⊊</u>	146,375. 42,767. 125,400. 5,404. 93,136. 4,979,924. 5,303,006.	146,375. 36,437. 97,268. 3,205. 35,764. 4,979,924. \$ 5,298,973.	19,986. 1,815. 13,517. \$ 35,318.	6,330. 8,146. 384. 43,855. \$ 58,715.

Statement 4
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Program
Grants and Service
Allocations Expenses

Living Water International (LWI) exists to demonstrate the love of God by helping communities acquire desperately needed clean water, and experience "living water"—the gospel of Jesus Christ—which alone satisfies the deepest thirst.

2007

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Statement 4 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description

Grants and Allocations

Program Service Expenses

Includes Foreign Grants: No

Water Projects: LWI drills water wells, constructs and installs bio-sand filtration systems, and repairs water pumps in developing countries to provide clean, safe water for desperate communities in the developing world. Many of the people served by LWI water solutions previously drank from polluted rivers, streams, or watering holes. In these situations, people often suffer from water-related diseases such as cholera, typhoid, schistosomiasis, and/or giardiasis, which cause severe symptoms, including death. Children under the age of five are particularly vulnerable to these diseases. Along with providing clean drinking water, LWI conducts education in basic health and hygiene practices needed to break the cycles of disease common in these communities. LWI makes every effort to ensure the life-long provision of safe, clean water in each community served. Teams always partner with the local community in implementing a water solution. Community members are trained in the basics of caring for their own water solution. The work of LWI is done in partnership with local churches, aid organizations, and government agencies. To date, LWI has completed over 4,800 water projects in 25 countries, providing clean water to more than 7.5 million people daily. Includes Foreign Grants: No

7,614,250.

Doubtful

0.

0.

0. \$7,614,250.

Statement 5 Form 990, Part IV, Line 51 Other Notes and Loans Receivable

Other Notes and Loans Living Water Int-Kenya Accounts

Balance Due Allowance

\$ 336,768. \$

Total Other Notes and Loans \$ 336,768. \$

Total Net Receivables \$ 336,768.

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-	2 5	2 8	- 8
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Statement 6	
Form 990, Part IV, Line 57	
Land, Buildings, and Equip	ment

Category	Basis	Accum. Deprec.	Book <u>Value</u>
Automobiles / Transportation Equipment Furniture and Fixtures Machinery and Equipment Buildings Land Total	\$ 70,865. 96,331. 341,877. 2,353,567. 310,000. \$ 3,172,640.	25,636. 152,041. 40,477.	\$ 41,315. 70,695. 189,836. 2,313,090. 310,000. \$ 2,924,936.

Statement 7 Form 990, Part IV, Line 58 Other Assets

Security deposits	\$	6,140.
Total	Ş	6,140.

Statement 8 Form 990, Part IV, Line 64b Mortgages and Other Notes Payable

O1. 1	. 37 1	D	1 7
Othe	r Not	es Pa	avable

Lender's Name: Date of Note: Maturity Date: Interest Rate: Purpose of Loan: Original Amount: Balance Due:	GE Capital 9/12/2006 9/12/2007 10.00% Ingersol Rand Air Compressor 30,580.	\$	10,775.
Lender's Name: Date of Note: Maturity Date: Repayment Terms: Interest Kate: Purpose of Loan: Original Amount: Balance Due:	Overseas Private Investment Co 2/21/2006 6/15/2017 \$10,000 semi-annually 5.4/8 Water well equipment in Kenya 200,000.	Ş	178,947.
Lender's Name: Date of Note: Maturity Date: Repayment Terms: Interest Rate: Purpose of Loan: Original Amount: Balance Due:	Overseas Private Investment Co 4/27/2006 6/15/2016 \$10,000 semi-annually 5.72% Water well equipment in Kenya 200,000.	\$	178,947.

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			-
	Living Water International		76-0324875
Statement 8 (continued) Form 990, Part IV, Line 64b Mortgages and Other Notes Payable			
Other Notes Payable	De Jene Jenden		
Lender's Name: Date of Note: Maturity Date: Repayment Terms: Interest Rate: Purpose of Loan: Original Amount: Balance Due:	De Lage Landen 2/02/2006 2/02/2009 \$434 monthly for 36 months 4.00% Forklift OSO30 15,639.	٥	F 044
Lender's Name: Date of Note: Maturity Date: Repayment Terms: Purpose of Loan: Original Amount:	Jo Ann Westmoreland 7/20/2007 6/20/2008 \$3000 monthly Purchase truck 36,000.	\$	5,044.
Balance Due:		\$	18,000.
	Total	\$	391,713.
	Total	\$ \$	68,307. 66,777. 135,084.
Statement 10 Form 990, Part IV-B, Line b(4) Other Amounts			
	Total	\$	68,307. 66,777. 135,084.
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6	u	8.5	

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Statement 11 Form 990, Part V-A List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Gary L. Evans P.O. Box 2557 Sugar Land, TX 77487-2257	Executive Direc \$ 45.00	92,170.	\$ 4,800.	\$ 0.
Jerry Wiles P.O. Box 2557 Sugar Land, TX 77487-2257	President 45.00	50,159.	4,800.	0.
Lewis Hough P.O. Box 2557 Sugar Land, TX 77487-2257	Vice President 45.00	61,798.	4,800.	0.
Emison Lewis P.O. Box 2557 Sugar Land, TX 77487-2257	Treasurer 45.00	62,178.	4,800.	0.
Sharon Evans P.O. Box 2557 Sugar Land, TX 77487-2257	Secretary 45.00	40,205.	4,800.	0.
Bruce Whitmire P.O. Box 2557 Sugar Land, TX 77487-2257	Vice President 45.00	56,847.	4,800.	0.
Tim Mulville P.O. Box 2557 Sugar Land, TX 77487-2257	Vice President 45.00	60,517.	4,800.	0.
Malcolm S. Morris P.O. Box 2557 Sugar Land, TX 77487-2257	Director 8.00	0.	0.	0.
Jay Brown P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Heidi Cruz P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Dr. Peter Kwan P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Ron Lee P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.

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Statement 11 (continued)
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Gary Loveless P.O. Box 2557 Sugar Land, TX 77487-2257	Board Chair \$ 8.00	0.	\$ 0.	\$ 0.
Martha McGuire P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Garnett Pampell P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Bill J. Walls P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
W. David Welch P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Dr. Doug Hodo P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
Scott Young P.O. Box 2557 Sugar Land, TX 77487-2257	Director 4.00	0.	0.	0.
	Total 3	\$ 423,874.	\$ 33,600.	\$ 0.

Statement 12 Form 990, Part V-A, Line 75b Compensation Paid to Related Individuals

Name and Relationship

Gary Evans, Executive Director is married to Sharon Evans, Secretary.

2007

Federal Statements

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Living Water International

76-0324875

Statement 13 Form 990, Part VI, Line 90a List of States which this Return is Filed

AL AK AZ AR CA CO CT DE DC FL GA ID IL IN IA KS KY LA MD ME MA MI MN MS MO NE NH NJ NM NY NV NC ND OH OK OR PA RI SC TN TX UT VA WA WV WI

Statement 14 Schedule A, Part III, Line 2 Transactions with Trustees, Directors, Etc.

Living Water International reimburses officers and key employees for expenses they incur on behalf of the organization under an accountable plan. See attached statement for details.

Schedule A, Part III, Line 2d - Reimbursement of expenses

Brad Saltzman		1,020 3,500 3,500 1,261 3,300 3,958 20,039	travel advance to Nicaragua Nov 9-17 reimburse for cancelled trip cost travel advance to El Salvador Sep 8-15 travel advance to El Salvador Aug 11-18 pump repair trip to Sudan Jun 24 - Jul 14 travel advance to El Salvador Apr 28 - May 05 monthly costs for Wilson's in Nicaragua
Bruce Whitmire	- v r S	1 259	reimbursement in excess of Rwanda/Kenya trip advance Oct 19 - Nov 16
	φ	1,500	Rwanda/Kenya trip advance Oct 19 - Nov 16
		1,048	trip to Virginia for USAID Conference
		9,900	Trip to Kenya/Rwanda/Uganda Aug 16 - Sep 01
			reimburse for LWI business telephone calls on personal cell phone
	<u>S</u>	14,936	-
Jerry Wiles - Pre	eside	nt	
ř	\$	2,000	Housing allowance (\$2,000 per month = \$24,000 annually)
		1,659	Travel meals & lodging for Aug & Sept
		9,900	Trip to Kenya/Rwanda/Uganda Aug 16 - Sep 01 Employee travel expenses Apr & May
			Travel meals & lodging for March DC Gala
		1,696	Travel meals & lodging for Feb & Mar
			_Travel meals & lodging for Jan
		23,198	-
John Nadolski -	Proc	ram Di	rector
oom maoisa	\$	9,900	travel advance for trip to Kenya for program assess/survey
		4.000	travel advance for trip to Kenya for program assess/survey
			reimbursement for expenses for trip to Kenya for program assess/survey
	\$	15,047	_
Lew Hough			
	\$	3,500	travel advance Guatemala Nov 30 - Dec 08
			travel advance Guatemala Nov 9-17
		3,500	travel advance El Salvador Sep 22-27
		3 833	travel advance Honduras Sep 9-16 license tags for two drill rigs 1 for Guatemala! For Honduras
		3,500	travel advance El Salvador Jul 8-14
		1,416	auto repairs to drill trip van and mileage
	-	2,000	_advance for Honduras trip Mar 26-30
	\$	25,248	
Rita Hough			
TATE STOMES	\$	3,500	travel advance Guatemala Sep 15-22
		4,000	travel advance Guatemala Jul 13-21
	- American Control		travel advance Guatemala Apr 21-28
	\$	11,000	<u></u>

Schedule A, Part III, Line 2d - Reimbursement of expenses

Paul Darilek - Deve	lopment	a to the state of annual fundraiser in Florida
\$	1,289	travel to San Antonio, LWI Houston and annual fundraiser in Florida
		El Salvador - Honduras - Nicaragua trip Sep 9-16
	3,468	El Salvador trip Jul 26 thru Aug 8
	3,500	El Salvador trip Aug 25 thru Sep 01
	2,857	Reimbursement for trip to El Salvador Apr 22 to June 02
		•
Agrangement		•
Stan Patyrak - Dev	elopment	
\$	1.347	Exhibit materials (fundraising/development)
	2,504	reimburse for costs of materials & supplies used in Houston Gala
	1,131	Sept trip to Liberia and Rwanda
	9 900	Trip to Kenya/Rwanda/Uganda Aug 16 - Sep 01
	4 300	Jan costs for Wilson's missionaries in Nicaragua
<u> </u>		**
	5 17,104	-
Stephen Jones		
Stephen Jones	3 500	travel advance for trip to Honduras Oct 07-14
4	2,000	travel advance for trip to Honduras Oct 07-14
	6,500	-
Tim Mulville - VP	2 000	travel advance for trip to Puebla Mexico
	2,000	travel advance for hip to racola me
** ** *		
Jim Mohney	n n 500	travel advance for trip to Haiti Dec 2-10
,	\$ 3,500	travel advance for trip to Puebla Mexico Nov 3-10
	3,500	travel advance for trip to Puebla Mexico Nov 3-10
	3,500	travel advance for trip to Haiti Oct 14-22
	1.004	travel expenses trip to Indonesia Aug 12-22
	4,000	travel advance for trip to Honduras Sept 23-30
	3,857	travel advance for trip to Nicaragus Aug 3-10
	3,500	travel advance for trip to Haiti May 6-14
	1,258	travel advance for trip to Honduras Apr 22-29
	3,500	travel advance for trip to Honduras Apr 22-29
	6,500	travel advance Honduras Mar 31-Apr 08 and Haiti Mar 19-26
300	\$ 34,119	
,		
Jodi Mohney		
	\$ 1,861	Advanced Health & Hygeine Training done in Oct
	1,243	
	2.146	March April & May expenses
_	\$ 5,250	
	بالتحكيات ب	·

12/31/07

2007 Federal Book Summary Depreciation Schedule

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Living Water International

76-0324875

No. Description	Date <u>Acquired</u>	Date Sold	Cost/ Basis	Bus. 	Cur 179/ SDA	Prior 179/ SDA/ Dept	<u> Method</u>	Life	Current Depr
orm 990/990-PF									
Auto / Transport Equipment									
3 Vehicles	- Various		70,865		34	17,822	S/L	12 _	9,861
Total Auto / Transport Equipment			70,865		0	17,822			9,86
5 Building	Various		2,353,567				S/L	38 _	43,63
Total Buildings Furniture and Fixtures			2,353,567		0	0			43,63
4 Furniture/fixtures	Various		96,331			21,437	S/L	7 _	4,77
Total Furniture and Fixtures			95,331		0	21,437			4,77
6 Land	Various		310,000						
Total Land Machinery and Equipment			310,000		0	0		_	
1 Drilling equipment	Various Various		225,815 116,062			52,745 48,472	S/L S/L	7 5	31,2(17,7)
Office/Computer equipment Total Machinery and Equipment	40110112		341,877		0	101,217		-	48,9
Total Depreciation			3,172,640		0	140,476		=	107,2
Grand Total Depreciation			3,172,640	:	0	140,476		=	107,22