			** PUBLIC DISCLOSURE COPY *								
	Ω	00	Return of Organization Exempt From	Income lax	OMB No. 1545-0047						
For	m Y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)	2022						
Do not enter social security numbers on this form as it may be made public.											
Inter	Department of the Treasury Internal Revenue ServiceDo not enter social security numbers on this form as it may be made public.Open to Public Inspection										
<u>A</u>	For the	e 2022 calend	ar year, or tax year beginning $ { m JUL}1,2022$ and ending	JUN 30, 2023							
	Check if applicabl		forganization	D Employer identifica	tion number						
	Addre										
	chang		ng Water International		-						
	chang Initial	ge Doing b		76-032487	2						
	return]Final		and street (or P.O. box if mail is not delivered to street address) Room/su Greenbriar Dr.	uite E Telephone number	000						
	return termir				24,893,621.						
	ated Amen	ded CLAF	own, state or province, country, and ZIP or foreign postal code ford, TX 77477	G Gross receipts \$							
F	return Applic		nd address of principal officer: Michael Mantel	H(a) Is this a group retu for subordinates?							
	tiòn pendi		as C above	H(b) Are all subordinates inclu							
1	Тах-ех	empt status:		527 If "No," attach a lis							
	Websi		water.cc	H(c) Group exemption							
				ear of formation: 1990 M							
	art I	Summary									
	1	Briefly describ	e the organization's mission or most significant activities: See Schee	dule O							
- Sec		-	· · · · · ·								
nai	2	Check this bo	x if the organization discontinued its operations or disposed of m	ore than 25% of its net asset	S.						
Governance	3	Number of vo	12								
Ğ	4	Number of inc		12							
es &	5	Total number	of individuals employed in calendar year 2022 (Part V, line 2a)		74						
viti	6		of volunteers (estimate if necessary)		320						
Activities &	7 a		d business revenue from Part VIII, column (C), line 12		0.						
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		0.						
				Prior Year	Current Year						
e	8		and grants (Part VIII, line 1h)	22,683,962. 26,778.	24,033,695.						
Revenue	9	•	ce revenue (Part VIII, line 2g)	2,353.	<u>3,814.</u> 28,374.						
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)	-84,543.	147,671.						
			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	22,628,550.	24,213,554.						
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,037,759.	13,631,423.						
			nilar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4)	0.	<u> </u>						
	45		r compensation, employee benefits (Part IX, column (A), line 4)	6,688,485.	7,854,172.						
Expenses	162		undraising fees (Part IX, column (A), line 11e)	0.	101,356.						
ben	b		ing expenses (Part IX, column (D), line 25) 2,835,160.								
Ĕ	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	3,372,390.	3,667,986.						
		-	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	25,098,634.	25,254,937.						
			expenses. Subtract line 18 from line 12	-2,470,084.	-1,041,383.						
or	3			Beginning of Current Year	End of Year						
Net Assets (20	Total assets (F	Part X, line 16)	8,393,530.	7,086,918.						
AS	21		(Part X, line 26)	1,069,456.	805,498.						
			fund balances. Subtract line 21 from line 20	7,324,074.	6,281,420.						
Pa	art II	•									
Und	ler pena	alties of perjury,	I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of my k	nowledge and belief, it is						
true	. correc	ct. and complete	. Declaration of preparer (other than officer) is based on all information of which prepa	arer has any knowledge.							

Cian	Signature of officer		Date							
Sign Here	Jonathan Schinzler, CFO									
	Type or print name and title									
	Print/Type preparer's name	eck PTIN								
Paid	Barbara Murphy	Barbara Murphy	03/28/24 ["] self	-employed P01386215						
Preparer	Firm's name Blazek & Vetterliz	Firm's El	<u>v 76-0269860</u>							
Use Only	Firm's address 2900 Weslayan, Su									
	Houston, TX 77027	Phone no	713-439-5739							
May the I	RS discuss this return with the preparer shown abo	ve? See instructions	•	X Yes No						

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

Form	1990 (2022) Living Water International	76-032487	5 Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
•	Living Water International (Living Water) exists to demon	nstrate th	
	love of God by helping communities in 18 developing count		
	desperately needed clean water and to experience "living	wator" -	+ho
		waler -	
	gospel of Jesus Christ.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as n	neasured by exper	ISES.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expense	es, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$20,514,666. including grants of \$13,631,423.) (Revenue	e\$	2,617.)
	WATER PROJECTS - WASH ACTIVITIES: Living Water trains and	l equips s	taff,
	organizations and volunteers to help developing communiti	les gain a	ccess
	to safe drinking water through the construction of new bo		
	piped water systems, filtration systems, rainwater harves		
	as the rehabilitation of existing systems that have falle		
	disrepair. Living Water introduces health, hygiene, and s		1
	education. The gospel is shared directly and through par		
	local churches and other ministries using various methods		
	training in oral Bible story-telling. Living Water empow		
	individuals and communities and seeks to use the most app		
	technology and socially responsible interventions. Livin	ig water s	erves
	all people regardless of religion, race, ethnicity or ger		
4b	/ · · · · · · · · · · · · · · · · · · ·)
	WATER ADVOCACY/ACTION: Living Water desires to end the wa		
	that affects 703 million people globally by immersion of		
	volunteers to become champions of the water crisis through	in educati	on
	and action. We do this by:		
	<u>1 - Leading in advocacy by equipping individuals/donors</u>		
	with resources on the effect the global water crisis has	on women,	
	children, men, and communities worldwide.		
	2 - Leading in action hundreds of volunteers into the fi		
	to assist in drilling wells, promoting hygiene and sanita		
	sharing the love of Jesus. During the 2022-2023 fiscal ye		
	Water led 286 volunteers into the field to assist in dril	lling well	s,
	teaching health and hygiene, and sharing their faith.		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue TRAINING: Living Water trains volunteers, missionaries, and the second seco	e\$	1,197.)
	TRAINING: Living Water trains volunteers, missionaries, a	and develo	pment
	professionals each year to drill wells, repair pumps, tea	ach good	
	hygiene practices, and use culturally appropriate story-t		
	techniques for Christian witness. Living Water uses trai	lning	
	techniques that equip participants to train others so the	knowledg	e and
	experience gained can be easily transferred.		
A -1	Other pregram conview (Departing on Schedule O)		
40	Other program services (Describe on Schedule O.)	X	
-	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 20,784,924.)	
<u>4e</u>	Total program service expenses 20,784,924.	-	orm 990 (2022)
		Fc	nn 330 (2022)

Form	000	(2022)	
-orm	990	(2022)	

Form 990 (2022) Living Water International
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		X
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		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
• -	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			37
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
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,		v	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		x
Ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	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	11d		x
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		x
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	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u>-</u> -
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2022)

Form	990	(2022)
	330	

Form 990 (2022) Living Water International
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes." complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa	T V Statements Regarding Other IRS Filings and Tax Compliance			·
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 38			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

	990 (2022) Living Water International 76-0324	375	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
-			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 74			
	, , , , , , , , , , , , , , , , , , , ,	01	v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	x
За ь	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		
b 4a	If "Yes," has it filed a Form 990-T for this year? <i>If</i> " <i>No</i> " <i>to line 3b, provide an explanation on Schedule O</i>	30		<u> </u>
чa	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	х	
h	If "Yes," enter the name of the foreign country See Schedule O	та		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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		X
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	Х	L
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 1			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	v	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	•		
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	50		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand 13c			37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		├──
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		x
	excess parachute payment(s) during the year?	15		
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
.,	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		1
	If "Yes," complete Form 6069.			

Form 990 (2022)

Living Water International

76-0324875 Page 6

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

X

Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	12						
	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 on Schedule O.								
b	b Enter the number of voting members included on line 1a, above, who are independent 1b 12								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	any other						
	officer, director, trustee, or key employee?			2		X			
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?			3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form S	990 wa	s filed?	4	Х	x			
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?								
6	Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	opoint o	one or						
	more members of the governing body?			7a		<u>x</u>			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	ders, or						
	persons other than the governing body?			7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-		37				
а	The governing body?			<u>8a</u>	X				
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					- v			
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X			
000	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a	X				
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			100					
~	and branches to ensure their operations are consistent with the organization's exempt purposes?								
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b									
12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х				
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	Yes," d	escribe						
	on Schedule O how this was done			12c	Х				
13	Did the organization have a written whistleblower policy?			13	Х				
14	Did the organization have a written document retention and destruction policy?			14	Х				
15	Did the process for determining compensation of the following persons include a review and approva	al by inc	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>			
b	Other officers or key employees of the organization			15b	х				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger					77			
	taxable entity during the year?			16a		X			
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	-							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orgar exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
<u></u> 17	List the states with which a copy of this Form 990 is required to be filedSeeSchedule	0							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a		T (section 501(c)(3)s	onlv)	availat	ble			
-	for public inspection. Indicate how you made these available. Check all that apply.		,,(-)(-)-	.,,					
	X Own website X Another's website X Upon request Other (explain	n on Sc	hedule O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			financ	cial				
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	l records						
	Jonathan Schinzler - 281-207-7800								
	4001 Greenbriar Dr., Stafford, TX 77477								

Part VII 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

Name and tite Average hours per week Description of the analysis of the analysis between the analys	(A)	(B)		(C)					(D)	(E)	(F)
hours per vex. box. interpretion is being mode compensation is the mode <thcompensation is="" mode<="" th="" the=""> compensatio</thcompensation>	Name and title	Average	(do	Position		Reportable	Reportable	Estimated			
Week (list ary burs for related organizations (W2/1099-MISC) momentation organizations (W2/1099-MISC) momentation (W2/1099-MISC) compensation organizations (W2/1099-MISC) compensation from the organizations (W2/1099-MISC) compensation organizations (W2/1099-MISC) compensation organizations (W2/1099-MISC) compensation from the organizations (1) Michael Mantel 40.00 x 301,726 0.67,501. (2) Jonathan Wiles 40.00 x 181,374 0.27,151. (3) Shona Barnard 40.00 x 174,480. 0.23,695. (4) Weeley Charles 40.00 x 159,748. 0.26,052. (5) Gary Evans 40.00 x 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 x 1146,405. 0.19,529. (7) Russell Debenport 40.00 x 1146,405. 0.23,816. (8) Pergy Shiver 40.00 x 1146,405. 0.23,816. (9) Casille Rodriguez 40.00 x 114,609. 0.23,816. (9) Casille Rodriguez 40.00 x 114,609. 0.23,816. (9) Casille Rodrigu		hours per	box, unless		unless person is both an			n an	compensation	compensation	amount of
(1) Michael Mantel 40.00 X 301,726. 0.67,501. President & CEO 15.00 X 301,726. 0.67,501. (2) Jonathan Wiles 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 181,374. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (4) Wesley Charles 40.00 X 168,909. 0.14,865. (5) Gary Bwans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 114,609. 0.23,816. (3) Pegy Shriver 40.00 X 111,775. 0.22,861. (9) Camile Rodriguez 40.00 X 119,017. 0.44,698. (10) Rick Allen 15.00 X 119,017. 0.44,698. (11) <molie allen<="" td=""> 1.00<!--</td--><td></td><td></td><td></td><td colspan="2"></td><td colspan="2">and a director/trustee)</td><td>lee)</td><td></td><td></td><td></td></molie>						and a director/trustee)		lee)			
(1) Michael Mantel 40.00 X 301,726. 0.67,501. President & CEO 15.00 X 301,726. 0.67,501. (2) Jonathan Wiles 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 181,374. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (4) Wesley Charles 40.00 X 168,909. 0.14,865. (5) Gary Bwans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 114,609. 0.23,816. (3) Pegy Shriver 40.00 X 111,775. 0.22,861. (9) Camile Rodriguez 40.00 X 119,017. 0.44,698. (10) Rick Allen 15.00 X 119,017. 0.44,698. (11) <molie allen<="" td=""> 1.00<!--</td--><td></td><td></td><td>irecto</td><td></td><td></td><td></td><td></td><td></td><td></td><td>J.</td><td>•</td></molie>			irecto							J.	•
(1) Michael Mantel 40.00 X 301,726. 0.67,501. President & CEO 15.00 X 301,726. 0.67,501. (2) Jonathan Wiles 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 181,374. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (4) Wesley Charles 40.00 X 168,909. 0.14,865. (5) Gary Bwans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 114,609. 0.23,816. (3) Pegy Shriver 40.00 X 111,775. 0.22,861. (9) Camile Rodriguez 40.00 X 119,017. 0.44,698. (10) Rick Allen 15.00 X 119,017. 0.44,698. (11) <molie allen<="" td=""> 1.00<!--</td--><td></td><td></td><td>e or d</td><td>stee</td><td></td><td></td><td>sated</td><td></td><td>e e</td><td>•</td><td></td></molie>			e or d	stee			sated		e e	•	
(1) Michael Mantel 40.00 X 301,726. 0.67,501. President & CEO 15.00 X 301,726. 0.67,501. (2) Jonathan Wiles 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 181,374. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (4) Wesley Charles 40.00 X 168,909. 0.14,865. (5) Gary Bwans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 114,609. 0.23,816. (3) Pegy Shriver 40.00 X 111,775. 0.22,861. (9) Camile Rodriguez 40.00 X 119,017. 0.44,698. (10) Rick Allen 15.00 X 119,017. 0.44,698. (11) <molie allen<="" td=""> 1.00<!--</td--><td></td><td></td><td>truste</td><td>al trus</td><td></td><td>yee</td><td>mper</td><td></td><td>· ·</td><td>1000 1120/</td><td>•</td></molie>			truste	al trus		yee	mper		· ·	1000 1120/	•
(1) Michael Mantel 40.00 X 301,726. 0.67,501. President & CEO 15.00 X 301,726. 0.67,501. (2) Jonathan Wiles 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 181,374. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (4) Wesley Charles 40.00 X 168,909. 0.14,865. (5) Gary Bwans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 114,609. 0.23,816. (3) Pegy Shriver 40.00 X 111,775. 0.22,861. (9) Camile Rodriguez 40.00 X 119,017. 0.44,698. (10) Rick Allen 15.00 X 119,017. 0.44,698. (11) <molie allen<="" td=""> 1.00<!--</td--><td></td><td></td><td>idual</td><td>tution</td><td>er</td><td>emplo</td><td>est co loyee</td><td>ler</td><td>,</td><td></td><td></td></molie>			idual	tution	er	emplo	est co loyee	ler	,		
(1) Michael Mantel 40.00 x 301,726. 0.67,501. President & CBO 15.00 x 301,726. 0.67,501. (2) Jonathan Wiles 40.00 x 181,374. 0.27,151. (3) Shona Barnard 40.00 x 181,374. 0.27,151. (3) Shona Barnard 40.00 x 174,480. 0.23,695. (4) Wesley Charles 40.00 x 159,748. 0.26,052. (5) Gary Evans 40.00 x 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 x 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 x 114,609. 0.23,816. (7) Russell Debenport 40.00 x 114,609. 0.23,816. (8) Peggy Shriver 40.00 x 111,775. 0.22,861. (9) Camille Rodriguez 40.00 x 111,775. 0.22,861. (9) Camille Rodriguez 0.00 x 119,017. 0.46,698. (10) Rick Allen 1.00 0.00 0.00.0. 0.00.0. (11) Molie Allen 1.000		line)	Indiv	Instit	Offic	Key (High empl	Form			
(2) Jonathan Wiles 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 174,480. 0.23,695. (4) Wesley Charles 40.00 X 174,480. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (5) Gary Evans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 114,609. 0.23,816. (7) Russell Debenport 40.00 X 1114,609. 0.23,816. (8) Pegy Shriver 40.00 X 111,775. 0.22,861. (9) Camille Rodriquez 40.00 X 119,017. 0.14,698. (10) Rick Allen 15.00 X X 0.0.0. 0. (11) Molite Allen 1.00 0.00 0.0.0. 0. 0. Director 0.000 X 0.0.0.0. 0. 0. 0. 0.	(1) Michael Mantel										
Chief Operating officer 0.00 X 181,374. 0.27,151. (3) Shona Barnard 40.00 X 174,480. 0.23,695. Chief Human Resources Officer 15.00 X 174,480. 0.23,695. (4) Wesley Charles 40.00 X 159,748. 0.26,052. (5) Gary Evans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 114,609. 0.23,816. (8) Pegay Shriver 40.00 X 111,775. 0.22,861. (9) Camille Rodriguez 40.00 X 111,775. 0.22,861. (9) Camille Rodriguez 0.00 X 119,017. 0.14,698. (10) Rick Allen 15.00 X 0.0.0.0. 0. (11) Mollie Allen 1.00 0.0.0.0.0. 0. 0. Director 0.000 X 0.0.0.0.0.0.<	President & CEO				Х				301,726.	0.	67,501.
(3) Shona Barnard 40.00 Chief Human Resources Officer 15.00 (4) Wesley Charles 40.00 Reg. VP, Latin Am & Caribbean 10.00 Reg. VP, Latin Am & Caribbean 10.00 Reg. VP, Latin Am & Caribbean 0.00 Regional VP, Asia 0.00 Constant Schinzler 40.00 Chief Financial Officer 15.00 X 146,405. (7) Russell Debenport 40.00 Sr. Dir of Strategy & Innovation 0.00 (8) Peggy Shriver 40.00 (9) Canille Rodriguez 40.00 VP, Marketing & Communications 0.00 (10) Rick Allen 15.00 Mille Allen 15.00 Mille Allen 1.00 Director 0.00 Mille Allen 1.00 Director 0.00 Mille Colynames 1.00 Director 0.00 Mille Allen 1.00 Director 0.00 Molis Allen 1.00 Director 0.00 Molie Allen 1.00	(2) Jonathan Wiles										
Chief Human Resources Officer 15.00 X 174,480. 0.23,695. (4) Weeley Charles 40.00 X 159,748. 0.26,052. Reg. VP, Latin Am & Caribbean 10.00 X 159,748. 0.26,052. (5) Gary Evans 40.00 X 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0.19,529. (7) Russell Debenport 40.00 X 111,775. 0.22,861. (7) Russell Debenport 40.00 X 111,775. 0.22,861. (8) Peggy Shriver 40.00 X 111,775. 0.22,861. (9) Canille Rodriquez 40.00 X 119,017. 0.14,698. (10) Rick Allen 15.00 X 10.0 0.0 0.0 (10) Rick Allen 1.000 X 0.0 0.0 0.0 Director 0.000 X 0.0 0.0 0.0 (11) Molite Allen 1.000 0.0 0.0 0.0 0.0 Director	Chief Operating Officer	0.00			Х				181,374.	0.	27,151.
(4) Wesley Charles 40.00 x 159,748. 0.26,052. (5) Gary Evans 40.00 x 168,909. 0.14,865. (6) Jonathan Schinzler 40.00 x 168,909. 0.144,865. (6) Jonathan Schinzler 40.00 x 146,405. 0.19,529. (7) Russell Debenport 40.00 x 1146,405. 0.23,816. (8) Peggy Shriver 40.00 x 111,775. 0.22,861. (9) Camille Rodriguez 40.00 x 119,017. 0.144,698. (10) Rick Allen 15.00 x 119,017. 0.144,698. (11) Mollie Allen 15.00 x 0.00 x 0.00. Director 0.00 x 0.00. 0.00. 0.00. (11) Mollie Allen 1.00 0.00. 0.00. 0.00. 0.00. Director 0.000 x 0.00. 0.00. 0.00. (12) Jennifer Gitiri 1.00 0.00. 0.00. 0.00. 0.00. Dir	(3) Shona Barnard										
Reg. VP, Latin Am & Caribbean 10.00 X 159,748. 0. 26,052. (5) Gary Evans 40.00 X 168,909. 0. 14,865. Regional VP, Asia 0.00 X 168,909. 0. 14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0. 19,529. (7) Russell Debenport 40.00 X 114,609. 0. 23,816. (8) Feggy Shriver 40.00 X 111,775. 0. 22,861. (9) Camille Rodriquez 40.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X 119,017. 0. 14,698. (11) Mollie Allen 1.00 X 0. 0. 0. Director 0.00 X 0. 0. 0. 0. (13) Carolyn Graves 1.00 0. 0. 0. 0. Director 0.00 X 0. 0. 0. 0. 0. (14) Jason Hall 1.00	Chief Human Resources Officer						Х		174,480.	0.	23,695.
(5) Gary Evans 40.00 X 168,909. 14,865. (6) Jonathan Schinzler 40.00 X 168,909. 14,865. (6) Jonathan Schinzler 40.00 X 146,405. 19,529. (7) Russell Debenport 40.00 X 114,609. 23,816. (8) Peggy Shriver 40.00 X 111,775. 0.23,816. (9) Canille Rodriguez 40.00 X 111,775. 0.22,861. (9) Canille Rodriguez 40.00 X 119,017. 0.14,698. (10) Rick Allen 15.00 X 119,017. 0.14,698. (11) Nollie Allen 1.00 X 0.00. 0.0. Director 0.00 X 0.00. 0.0. 0.0. (12) Jennifer Gitiri 1.00 0.00. 0.0. 0.0. 0.0. Director 0.000 X 0.0. 0.0. 0.0. 0.0. (13) Carolyn Graves 1.00 0.000 0.0. 0.0. 0.0. 0.0. 0.0. Director 0.000 X 0.0. 0.0. 0.0.	(4) Wesley Charles	40.00									
Regional VP, Asia 0.00 X 168,909. 0. 14,865. (6) Jonathan Schinzler 40.00 X 146,405. 0. 19,529. (7) Russell Debenport 40.00 X 146,405. 0. 19,529. (7) Russell Debenport 40.00 X 114,609. 0. 23,816. (8) Peggy Shriver 40.00 X 111,775. 0. 22,861. (9) Canille Rodriguez 40.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X 119,017. 0. 14,698. Chairman 0.000 X X 0. 0. 0. Director 0.000 X X 0. 0. 0. (11) Nollie Allen 1.00 X 0. 0. 0. 0. Director 0.000 X 0. 0. 0. 0. 0. (13) Carolyn Graves 1.00 X 0. 0. 0. 0.	Reg. VP, Latin Am & Caribbean						Х		159,748.	0.	26,052.
(6) Jonathan Schinzler 40.00 X 146,405. 0. 19,529. (7) Russell Debenport 40.00 X 114,609. 0. 23,816. (8) Peggy Shriver 40.00 X 114,609. 0. 23,816. (9) Camille Rodriguez 40.00 X 111,775. 0. 22,861. (10) Rick Allen 15.00 X 119,017. 0. 14,698. (11) Marketing & Communications 0.00 X X 0. 0. Chairman 0.00 X X 0. 0. 0. (11) Molie Allen 1.00 X 0. 0. 0. Director 0.00 X 0. 0. 0. 0. (12) Jennife Gitri 1.00 0. 0. 0. 0. Director 0.000 X 0. 0. 0. 0. 0. (13) Carolyn Graves	(5) Gary Evans										
Chief Financial Officer 15.00 X 146,405. 0. 19,529. (7) Russell Debenport 40.00 X 114,609. 0. 23,816. (8) Peggy Shriver 40.00 X 114,609. 0. 23,816. (9) Camille Rodriguez 40.00 X 111,775. 0. 22,861. (9) Camille Rodriguez 40.00 X 119,017. 0. 146,698. (10) Rick Allen 15.00 X 119,017. 0. 14,698. (11) Mollie Allen 15.00 X 0. 0. 0. Director 0.00 X 0. 0. 0. (11) Mollie Allen 1.00 X 0. 0. 0. Director 0.00 X 0. 0. 0. 0. (12) Jennifer Gitiri 1.00 X 0. 0. 0. 0. Director 0.00 X 0. 0. 0. 0. 0. Director	Regional VP, Asia				Х				168,909.	0.	14,865.
(7) Russell Debenport 40.00 X 114,609. 0.23,816. Sr. Dir of Strategy & Innovation 0.00 X 114,609. 0.23,816. (8) Peggy Shriver 40.00 X 111,775. 0.22,861. (9) Camille Rodriguez 40.00 X 111,775. 0.22,861. (9) Camille Rodriguez 40.00 X 119,017. 0.14,698. (10) Rick Allen 15.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X 0. 0. 0. (11) Molie Allen 1.00 0.00 X 0. 0. 0. Director 0.00 X 0.00 X 0. 0. 0. 0. Director 0.00 X 0.00 X 0. 0. 0. 0. (12) Jennifer Gitiri 1.00 0. 0. 0. 0. 0. Director 0.00 X 0.00 X 0. 0. 0. 0. 0. (14) Jason Hall 1.00 0. <td>(6) Jonathan Schinzler</td> <td></td>	(6) Jonathan Schinzler										
Sr. Dir of Strategy & Innovation 0.00 X $114,609.$ $0.23,816.$ (8) Peggy Shriver 40.00 X $111,775.$ $0.22,861.$ (9) Camille Rodriquez 40.00 X $111,775.$ $0.22,861.$ (9) Camille Rodriquez 40.00 X $111,775.$ $0.22,861.$ (9) Camille Rodriquez 40.00 X $119,017.$ $0.14,698.$ (10) Rick Allen 15.00 X $119,017.$ $0.14,698.$ (11) Mollie Allen 1.00 X $0.0.$ $0.0.$ Director 0.000 X $0.0.$ $0.0.$ (12) Jennifer Gitiri 1.00 0.00 $0.0.$ $0.0.$ Director 0.000 X $0.0.$ 0 (13) Carolyn Graves 1.00 $0.0.$ 0 0 Director 0.000 X 0 0 0 (14) Jason Hall 1.00 0 0 0 0 Director					Х				146,405.	0.	19,529.
(8) Peggy Shriver 40.00 X 111,775. 0.22,861. (9) Camille Rodriquez 40.00 X 111,775. 0.22,861. (9) Camille Rodriquez 40.00 X 119,017. 0.14,698. (10) Rick Allen 15.00 X X 0.00.0. 0.00.0. Chairman 0.000 X X 0.00.0.0. 0.00.0.0. (11) Mollie Allen 1.000 X 0.00.0.0.0. 0.00.0.0. Director 0.000 X 0.00.0.0.0. 0.00.0.0.0. (12) Jennifer Gitiri 1.000 X 0.00.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(7) Russell Debenport										
VP, Philanthropy Ops & Events 0.00 X 111,775. 0. 22,861. (9) Camille Rodriquez 40.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X X 0.00. 0. Chairman 0.000 X X 0. 0. Director 0.000 X X 0. 0. Director 0.000 X 0. 0. 0. (12) Jennifer Gitiri 1.00 X 0. 0. 0. Director 0.000 X 0. 0. 0. (13) Carolyn Graves 1.00 X 0. 0. 0. Director 0.000 X 0. 0. 0. 0. (14) Jason Hall 1.00 X 0. 0. 0. 0. Director 0.000 X 0. 0. 0. </td <td>Sr. Dir of Strategy & Innovation</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td>114,609.</td> <td>0.</td> <td>23,816.</td>	Sr. Dir of Strategy & Innovation						Х		114,609.	0.	23,816.
(9) Camille Rodriquez 40.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X X 0. 0. 0. Chairman 0.00 X X 0. 0. 0. 0. (11) Mollie Allen 1.00 X X 0. 0. 0. Director 0.00 X X 0. 0. 0. 0. (12) Jennifer Gitiri 1.00 X 0. 0. 0. 0. Director 0.000 X 0. 0. 0. 0. 0. 0. (13) Carolyn Graves 1.00 X 0. <	(8) Peggy Shriver										
VP, Marketing & Communications 0.00 X 119,017. 0. 14,698. (10) Rick Allen 15.00 X X 0. 0. 0. Chairman 0.000 X X 0. 0. 0. (11) Mollie Allen 1.00 X X 0. 0. 0. Director 0.000 X X 0. 0. 0. (12) Jennifer Gitiri 1.00 X 0. 0. 0. 0. Director 0.000 X 0. 0. 0. 0. 0. (13) Carolyn Graves 1.00 X 0. 0. 0. 0. Director 0.000 X 0. 0. 0. 0. (14) Jason Hall 1.00 X 0. 0. 0. 0. Director 0.000 X 0. 0. 0. 0. 0. (15) David Hawkins 1.000 X 0. <t< td=""><td>VP, Philanthropy Ops & Events</td><td></td><td></td><td></td><td></td><td></td><td>Х</td><td></td><td>111,775.</td><td>0.</td><td>22,861.</td></t<>	VP, Philanthropy Ops & Events						Х		111,775.	0.	22,861.
(10) Rick Allen 15.00 X X 0. 0. 0. Chairman 0.000 X X 0. 0. 0. 0. (11) Mollie Allen 1.00 0.000 X X 0. 0. 0. Director 0.000 X X 0. 0. 0. 0. Director 0.000 X 0.	(9) Camille Rodriquez										
Chairman 0.00 X X 0. <	VP, Marketing & Communications						Х		119,017.	0.	14,698.
(11) Mollie Allen 1.00 X 0.00 0.00 0.00 Director 1.00 0.00 X 0.00 0.00 0.00 Director 0.00 X 0.00 0.00 0.00 0.00 0.00 Director 0.00 X 0.00 0.00 0.00 0.00 0.00 Director 0.00 X 0.00 0.00 0.00 0.00 0.00 Director 0.000 X 0.00	(10) Rick Allen										
Director 0.00 X 0.	Chairman		Х		Х				0.	0.	0.
(12) Jennifer Gitiri 1.00 0.00 X 0.00.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(11) Mollie Allen										
Director 0.00 X 0.	Director		Х						0.	0.	0.
(13) Carolyn Graves 1.00 0.00 X 0.00.00 0.00 Director 0.000 X 0.00 0.00 0.00 0.00 (14) Jason Hall 1.00 0.000 X 0.00 0.00 0.00 Director 0.000 X 0.00 0.00 0.00 0.00 0.00 (15) David Hawkins 1.00 0.000 X 0.00 0.00 0.00 0.00 Director 0.000 X 0.00 0.00 0.00 0.00 0.00 (16) David Holland 1.00 0.000 0.00 0.00 0.00 0.00 Director 0.000 X 0.000 0.00 0.00 0.00 0.00 Director 0.000 X 0.000 0.00 0.00 0.00 0.00	(12) Jennifer Gitiri										
Director 0.00 X 0.00 O. 0.00	Director		Х						0.	0.	0.
(14) Jason Hall 1.00 0.00 X 0.00.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(13) Carolyn Graves										
Director 0.00 X 0.00 O. 0.00 O. 0.00 0.00 O. 0.00 </td <td>Director</td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	Director		Х						0.	0.	0.
(15) David Hawkins 1.00 0	(14) Jason Hall										
Director 0.00 X 0.00 O. 0.00	Director		Х						0.	0.	0.
(16) David Holland 1.00 0.00 X 0.00<	(15) David Hawkins										
Director 0.00 X 0.00 O. 0.0	Director		Х						0.	0.	0.
(17) Marcus Holman, Sr. 1.00 0.	(16) David Holland										
Director 0.00 X 0. 0. 0.	Director		Х						0.	0.	0.
	(17) Marcus Holman, Sr.										
	Director	0.00	Х						0.	0.	

232007 12-13-22

Form 990 (2022) Living Wa									76-0324	1875	Page 8
Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C	compensated Employee	s (continued)		
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable	Estim	ated
	hours per	box	, unles	ss per	rson i	is both	ı an	compensation	compensation	amou	nt of
	week		ceran	aaa	Irecto	or/trust	lee)	from	from related	oth	
	(list any	recto						the	organizations	comper	
	hours for related	or di	æ			ated		organization	(W-2/1099-MISC/	from	
	organizations	ustee	trust		e	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organiz and re	
	below	ual tr	tional		ploy6	st con /ee	_	,		organiz	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			gamz	ations
(18) Trey Little	1.00										
Director	0.00	х						0.	0.		0.
(19) Mike Mattina	1.00										
Director	0.00	Х						0.	0.		0.
(20) Mitchell Peairson	5.00										
Director	0.00	Х						0.	0.		0.
(21) Robert Pettigrew	1.00										
Director	0.00	Х						0.	0.		0.
(22) Jeffrey Singer	1.00										
Director	0.00	Х						0.	0.		0.
					<u> </u>						
1b Subtotal								1,478,043.	0.	240,	168.
c Total from continuation sheets to Part VI								0.	0.		0.
d Total (add lines 1b and 1c)								1,478,043.	0.		
2 Total number of individuals (including but n											
compensation from the organization						,		- ,			13
										Ye	s No
3 Did the organization list any former officer,	director, truste	ee, k	key e	mpl	loye	e, or	hic	phest compensated emp	loyee on		
line 1a? If "Yes," complete Schedule J for s	-			•	•				•	3	X
4 For any individual listed on line 1a, is the su										_	
and related organizations greater than \$150										4 X	
5 Did any person listed on line 1a receive or a	,		'								
rendered to the organization? If "Yes." com										5	X
Section B. Independent Contractors											
1 Complete this table for your five highest con	npensated ind	lepe	nder	nt co	ontra	actor	rs tl	hat received more than \$	100,000 of compens	ation from	
the organization. Report compensation for t	he calendar ye	ear e	endin	ig w	rith c	or wit	thir	the organization's tax y	ear.		
(A)								(B)		(C)	
Name and business	address							Description of s	ervices	Compensa	tion
Water4 Inc.								Installation			
2405 NW 10th St., Oklahom								services		294,	068.
Payroll Solutions CRSJ SA						1					
San Jose Palacio, San Jos								<u>Payroll serv</u>	ices	206,	823.
Diversity Travel Inc., 15		on	B	1v	d.	,					
Ste. 113, Arlington, VA 2	2209							<u>Travel servi</u>	ces	130,	316.
Salesforce.org Inc.		~						~ ~ ~		100	
<u>P.O. Box 203141, Dallas,</u>	TX 7532	U						Software ser	vices	129,	537.
2 Total number of independent contractors (ir		at 1	nitaa	l to t	the		tor		are then		
 Total number of independent contractors (ir \$100,000 of compensation from the organiz 	•	JUII	meo	10		1 1	ieu	above, who received m			

	•	
.		
\$100 000 of co	mnensation from	the organization

	<u>1 990 (</u>		ving Water	Internat	ional		76-0324	875 Page 9
Pa	rt VII							
		Check if Schedule O c	contains a response	or note to any lin	e in this Part VIII (A)	(B)	(C)	<u> </u>
					Total revenue	Related or exempt function revenue		Revenue excluded from tax under sections 512 - 514
s s	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b		1b					
s, G Amo	с	Fundraising events	1c	293,449.				
Gift lar	d	Related organizations	<u>1d</u>	011.016				
ns, Simi	е	Government grants (contr		214,916.				
utio ler S	f	All other contributions, gifts,		3525330.				
tribi Oth		similar amounts not included		689,213.				
Con	g h	Total. Add lines 1a-1f		000,210.	24033695.			
0.0				Business Code				
e	2 a	Registration	fees/oth.	900099	2,617.	2,617.		
e rvic	b	Training fees		611000	1,197.			
i Se	с							
Program Service Revenue	d							
rog	е							
д.	•	All other program service			3,814.			
	<u>g</u> 3	Total. Add lines 2a-2f Investment income (includ			5,014.			
	5				62,907.			62,907.
	4	Income from investment of						
	5	Royalties	<u>.</u>					
	(i) Real			(ii) Personal				
	6 a	Gross rents						
		Less: rental expenses	6b					
	C L	Rental income or (loss)	6c					
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other				
	<i>,</i> a	assets other than inventory	7a 612,763.					
	b	Less: cost or other basis						
en		and sales expenses	7ь647,296.					
svenue		Gain or (loss)	7c - 34,533.					
r Re		Net gain or (loss)		I	-34,533.			-34,533.
Other Re	8 a	Gross income from fundraisir including \$ 293						
0		contributions reported on						
		Part IV, line 18	<i>'</i>	25,720.				
	b	Less: direct expenses						
	с	Net income or (loss) from	fundraising events		-7,051.			-7,051.
	9 a	Gross income from gamin	-					
	_	Part IV, line 19						
		Net income or (loss) from Gross sales of inventory, l						
	10 4	and allowances						
	b	Less: cost of goods sold						
	с	Net income or (loss) from	sales of inventory					
s		-	7	Business Code	154 500			
eou	11 a	Insurance pro		900099	154,722.			154,722.
llan vent	b							
Miscellaneous Revenue	c b	All other revenue						
Σ	e	Total. Add lines 11a-11d		L	154,722.			
	12	Total revenue. See instruction			24213554.	3,814.	0.	176,045.

Form 990 (2022) Living Water International
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			Ŭ I	·
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	10 601 400	1.2 621 402		
	individuals. See Part IV, lines 15 and 16	13,631,423.	13,631,423.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	027 450	503,067.	220 770	101 612
~	trustees, and key employees	927,459.	505,007.	239,779.	184,613
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	other salaries and wages	5,430,657.	3,801,649.	507,385.	1,121,623
8	Pension plan accruals and contributions (include	5,150,05,0	3,001,0130		1/121/023
-	section 401(k) and 403(b) employer contributions)	217,534.	170,850.	15,103.	31,581.
9	Other employee benefits	771,742.	528,542.	80,079.	163,121
0	Payroll taxes	506,780.	345,154.	58,100.	103,526
1	Fees for services (nonemployees):	,		,	
a					
b		1,250.	1,250.		
с	• ··· ·	50,306.	,	50,306.	
	Lobbying				
е		101,356.			101,356.
f		-			
g					
	column (A), amount, list line 11g expenses on Sch 0.)	1,136,330.	479,710.	253,157.	403,463.
2	Advertising and promotion	11,217.			11,217.
3	Office expenses	347,759.	130,160.	94,935.	122,664.
4	Information technology	591,102.	432,730.	35,232.	123,140.
5	Royalties				
6	Occupancy	80,924.	24,175.	26,195.	30,554.
7	Travel	726,996.	270,258.	164,882.	291,856.
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	4 5 4 4		1	
0	Interest	1,703.		1,703.	
1	Payments to affiliates		171 000	ED 101	ED 101
2	Depreciation, depletion, and amortization	286,264. 130,174.	<u>171,922</u> . 82,391.	57,171. 21,528.	<u> </u>
3		130,1/4.	82,391.	21,528.	20,255
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount. list line 24e expenses on Schedule 0.)				
а	Duce C subernintions	115,727.	69,616.	13,259.	32,852.
b	Education & training	100,763.	67,551.	10,184.	23,028
с	Pastoral luncheon	41,827.	41,827.		· · ·
d	Timeran /	35,401.	22,406.	5,855.	7,140.
е	All other expenses	10,243.	10,243.		
5	Total functional expenses. Add lines 1 through 24e	25,254,937.	20,784,924.	1,634,853.	2,835,160
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Living W	later]	Internat	ional
----------	---------	----------	-------

76-0324875 Page 11

		Check if Schedule O contains a response or not	e to anv	/ line in this Part X			
		· ·			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	416,400.	1	21,947.		
	2	Savings and temporary cash investments			4,591,268.	2	3,673,879.
	3	Pledges and grants receivable, net			483,913.	3	830,639.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualit					
		under section 4958(f)(1)), and persons described				6	
s	7	Notes and loans receivable, net		· · · · · · · · · · · · · · · · · ·		7	
Assets	8	Inventories for sale or use				8	
As	9	–			261,887.	9	164,235.
	10a	Land, buildings, and equipment: cost or other		Γ			
		basis. Complete Part VI of Schedule D	10a	4,014,451.			
	b	Less: accumulated depreciation	10b	1,652,412.	2,609,137.	10c	2,362,039.
	11	Investments - publicly traded securities			30,925.	11	34,179.
	12	Investments - other securities. See Part IV, line 1			-	12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ		I	8,393,530.	16	7,086,918.
	17	Accounts payable and accrued expenses	949,429.	17	805,498.		
	18	Grants payable	I		18		
	19	Deferred revenue			120,027.	19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I		I		21	
ß	22	Loans and other payables to any current or form	er offic	er, director,			
Liabilities		trustee, key employee, creator or founder, subst					
lide		controlled entity or family member of any of thes	se perso	ons		22	
Ë	23	Secured mortgages and notes payable to unrela	ted thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated	d third p	· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24).	. Complete Part X			
		of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25			1,069,456.	26	805,498.
		Organizations that follow FASB ASC 958, che	ck here	e X			
ses		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions	6,180,431.	27	5,160,537.		
Bal	28	Net assets with donor restrictions	1,143,643.	28	1,120,883.		
pu		Organizations that do not follow FASB ASC 9					
Ъ		and complete lines 29 through 33.					
° or	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or ec				30	
As	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			7,324,074.	32	6,281,420.
	33	Total liabilities and net assets/fund balances			8,393,530.	33	7,086,918.

Form **990** (2022)

Form 990 (2022)
Part X Balance Sheet

Form	1990 (2022) Living Water International	76-	032487	/5	Pag	_{ge} 12
Pa	rt XI Reconciliation 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	24,2			
2	Total expenses (must equal Part IX, column (A), line 25)	2	25,2			
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,()41	, 38	83.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,3	324	,0	74.
5	Net unrealized gains (losses) on investments	5		-1	, 2'	71.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	6,2	281	, 42	20.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_)	/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				1
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red aud	it 🛛			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form 990 (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public

1

Nam	e of t	the organization						Employer	identification number				
	Living Water International 76-0324875 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.												
Pa	rt I	Reason for Public C	Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	IS.					
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck only	one box.)							
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)											
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,				
		city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)(iv). (C	Complete Part II.)										
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).						
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general j	oublic described in				
		section 170(b)(1)(A)(vi). (C	omplete Part II.)										
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)								
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a	land-grant	college				
		or university or a non-land-g	grant college of agricu	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or				
		university:											
10		An organization that norma	Ily receives (1) more t	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from				
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment				
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	ifter June 30, 1975.				
		See section 509(a)(2). (Cor	mplete Part III.)										
11		An organization organized a	and operated exclusi	vely to test for public sat	fety. See	section 50)9(a)(4).						
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functior	ns of, or to ca	rry out the	purposes of one or				
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section !	509(a)(3). (Check the box on				
		_lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	l 12g.					
а		Type I. A supporting orga	anization operated, su	upervised, or controlled	by its supp	ported orga	anization(s), t	pically by	giving				
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting				
	_	organization. You must c	complete Part IV, Se	ctions A and B.									
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with it	s supporte	d organizatio	n(s), by hav	ring				
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported				
	_	_ organization(s). You mus	t complete Part IV,	Sections A and C.									
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	ed with,				
		its supported organization		-									
d		Type III non-functionally	• •					Ŭ,					
		that is not functionally int	с с	e ,			-	l an attentiv	/eness				
	_	requirement (see instructi	-										
е		Check this box if the orga					Туре I, Туре	II, Type III					
		functionally integrated, or	51	nally integrated supporting	ng organiz	ation.							
t		er the number of supported o	•										
<u> </u>		vide the following information i) Name of supported	ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount o	fmonetary	(vi) Amount of other				
	``	organization	(,	(described on lines 1-10	in your governi Yes	ng document? No	support (see ir		support (see instructions)				
		-		above (see instructions))	165								
Tota	1												

Part II

Living Water International

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	22863039.	24073207.	20743316.	22683962.	24033695.	114397219		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4		22863039.	24073207.	20743316.	22683962.	24033695.	114397219		
	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						18095428.		
-									
	Public support. Subtract line 5 from line 4.						96301791.		
		() 00/0	(1) 00 (0	() 2222	()) 000 (() 0000	(0		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020 20743316.	(d) 2021	(e) 2022	(f) Total		
		22803039.	240/320/.	20/43310.	22083962.	24033695.	114397219		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources \dots	2,595.	1,281.	1,154.	4,103.	62,907.	72,040.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)						154,772.		
11	Total support. Add lines 7 through 10						114624031		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	71,296.		
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	ear as a section 5	01(c)(3)			
	organization, check this box and stop	bhere							
Sec	ction C. Computation of Publi	c Support Per	centage						
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	84.02 %		
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	85.24 %		
16a	33 1/3% support test - 2022. If the o					ore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supp	orted organization	I			X		
b	33 1/3% support test - 2021. If the	organization did no	t check a box on						
17a	and stop here. The organization qualifies as a publicly supported organization								
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization								
	meets the facts-and-circumstances te			-					
h	10% -facts-and-circumstances test		•		•				
~	more, and if the organization meets the	-							
	organization meets the facts-and-circl								
18	Private foundation. If the organization		•				······		
10	i mate roundation. If the organization			a, 100, 17a, 01 17L	, oneon unis DUX a		,		

Schedule A (Form 990) 2022

	Schedule A	Form	990) 2022
--	------------	------	-----	--------

Schedule A (Form 990) 2022 Living Water International Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>	
14	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) orgai	nization,
						·····	L
	tion C. Computation of Publi					1 1	
	Public support percentage for 2022 (I		-	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20)22 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
19 a	33 1/3% support tests - 2022. If the						line 17 is not
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization			•		•	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

1

Yes

No

Living Water International

orm 990) 2022	Living	Water	International

2

Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A pe	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	pelow, the governing body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
с	A 35	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detai	i in Part VI.	11c		
Sec	tion	B. Type I Supporting Organizations			
				Yes	No
4	Did t	he appending body, members of the appending body, officers acting in their official capacity, or membership of one or			

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization</i> (s)	
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

	<u>a. or controllea</u>		
Section C. T	ype II Supp	orting Org	anizations

Schedule A (F

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed
 Image: Control or management of the support of the s

|--|

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ear (see instructions)
-	Oneon the box next to the method that the organization used to satisfy the integral r art rest during the ye	<i>,ai</i> (<i>eeeeaiea<i>ieaieaieaieaieaieaieaieaieaieaieaa<i>ieaieaieaieaieaieaieaieaa<i>ieaieaieaiea<i>ieaieaiea<i>ieaieaieaiea<i>ieaieaiea<i>ieaieaieaieaieaieaiea<i>ieaieaiea<i>ieaieaieaieaieaieaieaieaieaieaieaieaieaieaieaieaiea<i>ieaieaieaieaieaiea<i>ieaieaieaieaieaieaieaiea<i>iaaiaaiaaiaaiaaaaa<i>aaaaaaaa</i></i></i></i></i></i></i></i></i></i></i></i></i></i>

- a The organization satisfied the Activities Test. *Complete* line 2 *below*.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instructions).
---	--	---	-------------------------	-----------------	---------------------	---------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

No

Yes

ecti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ecti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ecti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

 Schedule A (Form 990) 2022
 Living Water International

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

. . . . -_

232026 12-09-22

instructions).

Schedule A (Form 990) 2022

e Excess from 2022

90	2022		птν	' THG	wat	-e
		-	 			

Sect	ion D - Distributions	Current Year			
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required - pro	5			
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
с	Excess from 2020				
d	Excess from 2021				

Schedule A (Form 990) 2022

 Schedule A (Form 990) 2022
 Living Water International

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

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

Schedule A, Part II, Line 10, Explanation for Other Income:

Insurance proceeds

2022 Amount: \$ 154,772.

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Li	ving Water International	76-0324875
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, ,	s covered by the General Rule or a Special Rule.	
Note: Only a section 501(c)	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set in the set of t

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Living	g Water International	76-0324875	
Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of cont	tribution
1		Sector Person \$ 3,400,000. Payroll Noncash (Complete Part noncash contril	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of cont	tribution
2		Person \$ 1,369,113. \$ 0 (Complete Part noncash contril	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of cont	tribution
3		Person \$ 1,042,000. \$ 0,042,000. Complete Part Noncash (Complete Part noncash contril	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of cont	tribution
4		Person \$ 1,000,000. \$ 0,000. Complete Part Noncash (Complete Part noncash contril	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of cont	tribution
5		Person \$ 909,092. \$ 009,092. (Complete Part noncash contril	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of cont	tribution
6_		Person Payroll \$ 502,462. Noncash	X

Employer identification number

noncash contributions.) Schedule B (Form 990) (2022)

(Complete Part II for

	ganzation
Living	g Water International
Part II	Noncash Property (see instructions). Use dup
(a)	
No.	(b)
from	Description of noncash property
Part I	

Schedule B (Form 990) (2022)

Name of organization					
Living	Water	International			

plicate copies of Part II if additional space is needed.

(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
		\$	
(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
		 \$	

Employer identification number

76-0324875

Name of org	anization			Employer identification number		
Livina	Water International			76-0324875		
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) th completing Part III, enter the total of exclusively religious, cha Use duplicate copies of Part III if additional spi	rough (e) and the following line en ritable, etc., contributions of \$1,000 or	try. For organizations	hat total more than \$1,000 for the year		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
-						
		(e) Transfer of gi	ft			
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	ansferor to transferee		
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
·						
	· · · · · ·	(e) Transfer of gi	ft			
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	ansferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
·						
		(e) Transfer of gi	ft			
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	ansferor to transferee		
		[
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
·						
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relation		Relationship of tra	ansferor to transferee		

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 4 l **Open to Public** Inspection

Employer identification number 76-0324875

Name of the	ne organization
-------------	-----------------

Living Water International

Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	-				
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used o	only			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confer	ing			
Dec						
Par			, line 7.			
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recrea		orically important land area			
	Protection of natural habitat	Preservation of a cert	ified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a co				
	day of the tax year.		Held at the End of the Tax Year			
			2a			
b			2b			
C.	Number of conservation easements on a certified historic str		2c			
d	Number of conservation easements included in (c) acquired					
•	historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the organ	ization during the tax			
	year	coment is located				
4	Number of states where property subject to conservation ea					
5	Does the organization have a written policy regarding the pe violations, and enforcement of the conservation easements i		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
U			sheasements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	sements during the year			
•						
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)	(i)			
9	In Part XIII, describe how the organization reports conservat					
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statements th	at describes the			
	organization's accounting for conservation easements.	Ũ				
Par		f Art, Historical Treasures, or Other S	imilar Assets.			
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 98	58, not to report in its revenue statement and bal	ance sheet works			
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in furthera	nce of public			
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these items.				
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and balance	e sheet works of			
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtherance	e of public service,			
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
	···· · · · · · · · · · · · · · · · · ·					
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial gain,	provide			
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X		\$			
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2022			

Sche		Water Inte:					<u>-0324</u>		
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical 1	reasures, or C	Other Si	milar As	sets ₍₍	continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of th	ne following that ma	ake signif	icant use (of its		
	collection items (check all that apply):								
а	Public exhibition	c	Loan or o	exchange program					
b	Scholarly research	e							
с	Preservation for future generations							,	
4	Provide a description of the organization's co	ollections and explain	n how thev furthe	r the organization's	sexempt	ourpose ir) Part XIII.		
5	During the year, did the organization solicit o		-	-					
-	to be sold to raise funds rather than to be ma						ΓY	es	No
Par	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pai							0, 01	
1a	Is the organization an agent, trustee, custodi		liary for contribut	ons or other assets	s not inclu	Ided			
iu	on Form 990, Part X?							es	No
h	If "Yes," explain the arrangement in Part XIII						. ـ •		
5			nowing table.		ſ		Ar	nount	
~	Reginning balance					1c			
	Beginning balance					1d			
	Additions during the year					1e			
f	Distributions during the year					1f			
	Ending balance Did the organization include an amount on Fe							es	No
	If "Yes," explain the arrangement in Part XIII.				•				
Par									
	Complete	(a) Current year	(b) Prior year	(c) Two years b		Three years	back (e) Four ve	ars back
19	Beginning of year balance		((-,	()	<u> </u>		, · · · · · · · · ·	
b	Contributions								
0	Net investment earnings, gains, and losses								
с А	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses								
g	End of year balance	L	l a (lina 1 a aakumr						
2	Provide the estimated percentage of the curr	•		(a)) held as.					
a	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С		%							
0-	The percentages on lines 2a, 2b, and 2c sho				6				
Ja	Are there endowment funds not in the posse	ssion of the organiza	ation that are neit	and administered	for the			Ye	es No
	organization by:						L		
	(i) Unrelated organizations							Ba(i)	
	(ii) Related organizations							Ba(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organiza			۲? 			L	3b	
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment funds.						
I ai	Complete if the organization answere) Part IV line 11	See Form 000 P	art X line	10			
	· · · · ·						(-1)	Deal	-1
	Description of property	(a) Cost or o basis (investr	. ,	ost or other sis (other)	(c) Accur deprec		(a)	Book v	alue
4-	Land		,	104,738.	acpiec	adon	+	404	738.
	Land			727,909.	1 1 2 0	9,377			532.
	Buildings		<u> </u>	94,738.		1,815		<u>, 0 c c a</u>	923.
	Leasehold improvements			720,822.		1,220		220	602.
	Equipment			66,244.	49.	1,440	•		244.
	Other		<u> </u>				+		039.
l ota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	<u>X. column (B). lin</u>	e 10c.)			<u> </u>	J04,	032.

Schedule D (Form 990) 2022

Living Water International Schedule D (Form 990) 2022 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (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 (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value 1 (1) Federal income taxes (2)(3) (4) (5) (6) (7) (8) (9)

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

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

	dule D (Form 990) 2022 Living Water International	76-0324875 Page 4	
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	•	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1			1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	• •	er Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	1.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	. 4b	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		
Pa	t 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.

Department of the Treasury Internal Revenue Service	Go to w	ww.irs.aov/Form	1990 for instructions and the latest i	information.		pen to Public
Name of the organization					Employer ide	entification number
Living Water In	ternatio	nal			76-0324	875
Part I General Info	rmation on A	ctivities Out	side the United States. Compl	ete if the organ		
Form 990, Part IV				ete il the organ		
		n maintain record	ds to substantiate the amount of its gra	ants and other a	assistance,	
-	-		he selection criteria used to award the			X Yes No
2 For grantmakers. Desc United States.	cribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and ot	her assistance o	outside the
			an be duplicated if additional space is r			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
Central America and						
the Caribbean	0	61	Program services	WASH Projec	ts	1,126,750.
Central America and						
the Caribbean	0	61	Grantmaking	WASH Projec	ts	2,946,059.
North America -	, , , , , , , , , , , , , , , , , , ,	01				
Canada and Mexico,						
, but not the United						
States	0	6	Program expenses	WASH Projec	ts	9,723.
North America -						
Canada and Mexico,						
but not the United						
States	0	6	Grantmaking	WASH Projec	ts	1,133,752.
South Asia	0	19	Program expenses	WASH Projec	it a	217,545.
		19		MADII 110 Jec		217,545.
South Asia	0	19	Grantmaking	WASH Projec	ts	1,392,291.
Sub-Saharan Africa	0	154	Program services	WASH Projec	ts	643,945.
Sub-Saharan Africa	0	154	Grantmaking	WASH Projec	ts	7,903,430.
3 a Subtotal	0	240				15,373,495.
b Total from continuation sheets to Part I	0	0				255,887.
c Totals (add lines 3a	0	240				15 629 382.
300 301	. 0	. 240				

Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

Schedule F (Form 990) 2022

OMB No. 1545-0047

Open to Public

SCHEDULE F (Form 990)

Schedule F (Form 990)	76-0324875 Page 7				
Part I Continuation		s per Region	ernational • (Schedule F (Form 990), Part I, line 3)	
(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
South America	0	0	Grantmaking	WASH Projects	255,887.
Totals					255,887.
	I	1			====,===,

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America						
		and the Caribbean	WASH projects	15,105.	Wire	0.		
		Central America						
			WASH projects	532,001.	Wire	0.		
		Central America		1000061				
		and the Caribbean	WASH projects	1092061.	wire	0.		
		Central America						
		and the Caribbean	WASH projects	674,585.	Wire	0.		
		Central America						
			WASH projects	632,307.	Wire	0.		
		North America -		,				
		Canada and						
		Mexico, but not						
		the United States	WASH projects	1133752.	Wire	0.		
		South Asia	WASH projects	1392291.	Wire	0.		
		South America	WASH projects	255,887.	Wire	0.		
2 Enter total number of			recognized as charities by the			••		
			or counsel has provided a se			►		19
3 Enter total number of			·		·····	·····		0

Schedule F (Form 990) 2022

Schedule F (Form 990)

Living Water International

76-0324875

schedule F (Form 990)		y water inte			70 03	2407J		Page
Part II Continuation of	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Sub-Saharan						
		Africa	WASH projects	433,908.	Wire	0.		
		Sub-Saharan						
		Africa	WASH projects	237,509.	Wire	0.		
		Sub-Saharan		05 000				
		Africa	WASH projects	95,000.	Wire	0.		
		Sub-Saharan						
		Africa	WASH projects	794,961.	Wire	0.		
		Sub-Saharan		010 004				
		Africa	WASH projects	812,924.	Wire	0.		
		Sub-Saharan						
		Africa	WASH projects	762,242.	Wire	0.		
		Sub-Saharan		406,178.				
		Africa	WASH projects	406,178.	wire	0.		
		Sub-Saharan						
		Africa	WASH projects	743,714.	Wire	0.		
		Sub-Saharan	WAGU, products	2021004				
		Africa	WASH projects	2821884.	wire	0.		

Living Water International 76-0324875 Schedule F (Form 990) Page 2 Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 1 (g) Amount of (h) Description (i) Method of (b) IRS code section (d) Purpose of (e) Amount (f) Manner of (a) Name of organization (c) Region non-cash of non-cash valuation (book, FMV, and EIN (if applicable) of cash grant cash disbursement grant appraisal, other) assistance assistance Sub-Saharan Africa WASH projects 333,380.Wire Ο. Sub-Saharan Africa WASH projects 461,730.Wire Ο.

Living Water International

76-0324875

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2022

			Water	International
Part IV	Foreign Form	S		

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X 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? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "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)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

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

Part I, Line 2:

Living Water International (LWI) provides services in developing

countries by providing support to independent 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 in Form

990, Part III, Line 4. LWI requires each grantee to provide evidence

regarding the use of funds, such as a written report, photographs, field

inspection by an LWI representative or other verification as deemed

appropriate.

Part I, line 3:

LWI follows the accrual method of accounting.

All of the amounts reported in Part I reflect expenditures in the region,

not investments.

SCHEDULE G	Suppleme	ental Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19,	or if the	2022
Department of the Treasury		Attach to Form 990 of	or Form	n 990	-EZ.			Open to Public
Internal Revenue Service		to www.irs.gov/Form990 for instru	ctions	and t	ne latest information	n.		Inspection
Name of the organizatio								entification number
		<u>Water Internationa</u>					76-0324	
	complete this par	 Complete if the organization answe t. 	ered "Y	'es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E2	Z filers are not
 a X Mail solicita b X Internet and c X Phone solic d X In-person so 2 a Did the organization key employees list 	tions l email solicitations itations olicitations on have a written o ted in Form 990, P 0 highest paid indiv	f Solicita g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Ye	
(i) Name and addres or entity (fund	s of individual	(ii) Activity	have or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
Westfall Group, In			Yes	No			101 256	
Box 81712, Atlanta	, GA 30366	Fundraising Consultant		x	0.		101,356.	0.
Total							101,356.	,
	ich the organizatic	on is registered or licensed to solicit of	contrib	utions	or has been notified	it is (egistration

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

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

Schedule G (Form 990) 2022

Living Water International

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990.FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990	EZ, lines 1 and 6b. List e	vents with gross receipt	ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			One Thirst	One Thirst		(add col. (a) through
			Chicago 2023	Wisconsin 23	2	
			(event type)	(event type)	(total number)	col. (c))
nue						
Revenue	1	Gross receipts	119,730.	82,849.	116,590.	319,169.
R,				,	•	
	2	Less: Contributions	119,730.	68,504.	105,215.	293,449.
			,	,	•	,
	3	Gross income (line 1 minus line 2)		14,345.	11,375.	25,720.
				,	•	, , , , , , , , , , , , , , , , , , , ,
	4	Cash prizes				
	-					
	5	Noncash prizes				
SS	-					
Direct Expenses	6	Rent/facility costs		7,333.		7,333.
хре	-	,		,		,
ц	7	Food and beverages			1,788.	1,788.
)ire	-				,	,
	8	Entertainment				
	9	Other direct expenses		14,845.	8,795.	23,650.
	10	Direct expense summary. Add lines 4 through		32,771.		
		Net income summary. Subtract line 10 from li	()			-7,051.
Pa	rt I					
		\$15,000 on Form 990-EZ, line 6a.				
				(b) Pull tabs/instant		(d) Total gaming (add
anı			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
щ	1	Gross revenue				
	-					
	2	Cash prizes				
ses	-	· · · · · · · · · · · · · · · · · · ·				
oen	3	Noncash prizes				
Direct Expenses	-					
ect	4	Rent/facility costs				
Di	•	· · · · · · · · · · · · · · · · · · ·				
	5	Other direct expenses				
	<u> </u>					

	6	Volunteer labor		No		No	Νο		
	7	Direct expense summary. Add lines 2 through	5 in	column (d)			 		
	8	Net gaming income summary. Subtract line 7	from	line 1, column (d)			 		
9	Ent	er the state(s) in which the organization conduc	cts g	aming activities:					
		ne organization licensed to conduct gaming ac No." explain:	tivitie	es in each of these s	states	s?	 	Yes	└── No
_									

%

Yes

% [

Yes

%

] Yes

232082 10-27-22

No

Sch	edule G (Form 990) 2022	Living Water	International	76-0324875 Page 3
11	Does the organization conduct ga	ming activities with nonme	mbers?	Yes No
			, or a member of a partnership or other entity formed	
	to administer charitable gaming?			Yes No
13	Indicate the percentage of gaming	g activity conducted in:		
á	The organization's facility			13 a %
14	Enter the name and address of the	e person who prepares the	organization's gaming/special events books and records	5.
	Name			
	Address			
15a	Does the organization have a con	tract with a third party from	whom the organization receives gaming revenue?	YesNo
ł	If "Yes," enter the amount of gam			unt
	of gaming revenue retained by the			
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:			
	•	state law to make charitab	ble distributions from the gaming proceeds to	
	retain the state gaming license?			Yes No
ł	Enter the amount of distributions		be distributed to other exempt organizations or spent in	the
_	organization's own exempt activit		\$	
Pa			lanations required by Part I, line 2b, columns (iii) and (v); a ny additional information. See instructions.	and Part III, lines 9, 9b, 10b,
	100, 100, 10, and 170, as			

raitiv	Supplemental informatic	(continued)		

SCI	HEDULE J	Compensati	on Information	I	OMB No. 1	545-004	47
(Foi	rm 990)		rustees, Key Employees, and Highest		20	22)
			ated Employees ered "Yes" on Form 990, Part IV, line 23.		20		•
Depar	ment of the Treasury		to Form 990.		Open to		ic
	I Revenue Service	Go to www.irs.gov/Form990 for in	nstructions and the latest information.		Inspe		
Nam	e of the organization			Employer id			nber
De		Living Water Internat	cional	76-0	32487	5	
Pa		Regarding Compensation					
			<u></u>			Yes	No
1 a				990,			
			1 7 7				
		art VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Istration and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or imbursement or provision of all of the expenses described above? If "No," complete Part III to explain id the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, ustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? dicate which, if any, of the following the organization used to establish the compensation of the organization to stablish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee X Independent compensation consultant X Form 990 of other organizations X Approval by the board or compensation committee uring the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing ganization or a related organization: eevieve a severance payment or change-of-control payment? articipate in or receive payment from a supplemental nonqu					
			J Personal services (such as maid, chadned	r, chei)			
h	If any of the bayes	n line to are checked, did the organization follow	v a written policy regarding poyment or				
D	•	· -			1b	Х	
2							
	 Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the organization used to establish the compensation of the organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan? 			2	Х		
	trustees, and onice	s, including the GEO/Executive Director, regardin			2		
3	Indicate which if ar	v of the following the organization used to estab	lish the compensation of the organization's				
Ū							
			, 0				
		· · · · · ·	_				
				ommittee			
4	During the year, dic	any person listed on Form 990, Part VII, Section	A, line 1a, with respect to the filing				
			, , <u>,</u> , , , , , , , , , , , , , , , ,				
а	-				4a		X
b	Participate in or rec						Х
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Written employment contract X Independent compensation consultant X Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? D Participate in or receive payment from a supplemental nonqualified retirement plan?					Х	
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Written employment contract X Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in or receive payment from a supplemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c	(3), 501(c)(4), and 501(c)(29) organizations mus	st complete lines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the o	organization pay or accrue any compensatio	n			
	contingent on the r	evenues of:					
а	The organization?				5a		X
							X
	If "Yes" on line 5a c	r 5b, describe in Part III.					
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the o	organization pay or accrue any compensatio	n			
	contingent on the n						
а	The organization?				6a		X
	Any related organiz	ation?					X
		r 6b, describe in Part III.					
7		n Form 990, Part VII, Section A, line 1a, did the o					
		es 5 and 6? If "Yes," describe in Part III			7		X
8		eported on Form 990, Part VII, paid or accrued p		е			
		otion described in Regulations section 53.4958-4			8		X
9		d the organization also follow the rebuttable pres					
		53.4958-6(c)?					
LHA	For Paperwork R	duction Act Notice, see the Instructions for Fo	orm 990.	Sched	ule J (Forn	n 990)	2022

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't 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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Michael Mantel	(i)	280,504.	100.	21,122.	61,000.	6,501.	369,227.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Jonathan Wiles	(i)	181,014.	100.	260.	9,463.	17,688.	208,525.	0.
Chief Operating Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Shona Barnard	(i)	173,320.	100.	1,060.	8,997.	14,698.	198,175.	0.
Chief Human Resources Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Wesley Charles	(i)	159,029.	100.	619.	8,364.	17,688.	185,800.	0.
Reg. VP, Latin Am & Caribbean	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Gary Evans	(i)	165,844.	100.	2,965.	8,364.	6,501.	183,774.	0.
Regional VP, Asia	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Jonathan Schinzler	(i)	146,187.	100.	118.	7,538.	11,991.	165,934.	0.
Chief Financial Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Part I, Line 1a:

Living Water provides its CEO Mike Mantel with a vehicle to assist with the

large travel burden that is put upon him for program/donor meetings

throughout the state of Texas. This benefit is included in his W-2

compensation and he is provided a gross-up payment to offset additional

taxes incurred.

Living Water also provides its CEO Mike Mantel an additional medical

benefit. This annual amount is grossed up to offset any additional taxes.

The Board's CEO Compensation Committee determines the amount each year.

SCHEDULE L (Form 990)	Complete if		ganization ans 28b, or 28c,	wered or Fori	"Yes" n 990-	on Form 990, Part EZ, Part V, line 38a o or Form 990-EZ.	IV, line 25a, 25b, 26	, 27, 2	8a,		2	02 02	2
epartment of the Treasury ternal Revenue Service	Go	to ww				ructions and the lat	est information.			-	spect		
ame of the organizatior	ı							Em	ployer	[,] identi	ificati	on nu	mbe
			ter Inte							248	75		
Part I Excess E	Benefit Tran	sactio	ons (section 5	01(c)(3), secti	on 501(c)(4), and see	ction 501(c)(29) orga	nizatic	ons on	ly).			
Complete if	the organization						, or Form 990-EZ, Pa	art V, I	ine 40	b.			
1 (a) Name of disquali	fied person	(b) F	Relationship bet person and o			ified (o	c) Description of tran	sactio	n			Corre	
.,	•		person and o	ryaniza			, i					es	No
											_		
											_		
											_		
											_		
		+									_		
2 Enter the amount o													
Complete if	the organization	on ansv <u>rm 990</u> ionship	vered "Yes" on , Part X, line 5, ((c) Purpose of loan	Form 9 6, or 22 (d) Lo		Part V, line 38a or F (e) Original principal amount	Form 990, Part IV, lin (f) Balance due	(g)	or if th) In ault?	e orgai (h) App by boa	oroved ard or		
	J. J.				From			Yes	No	Yes	No	Yes	<u> </u>
				10	FIOIII			165	NO	165	NU	Tes	
					1								
				1	1								
				1									
otal			1			\$	1						
	r Assistanc	e Ben	efiting Inter	rested	l Per								
			vered "Yes" on										
(a) Name of interes							(d) Type	of		(0)		050 0	

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990) 2022

76-0324875	Page 2
------------	---------------

	Schedule L (Form 990))2022 Li	lving Wa	ter Into	ernationa
--	-----------------------	----------	----------	----------	-----------

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) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
Natalie Mantel	CEO spouse	104,514.	Compensatn		X
Sharon Evans	VP spouse	45,784.	Compensatn		X

Part V Supplemental Information.

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

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30
Attach to Form 990.

h to Form 990.	
instructions and the latest information	

loyer identification number
76-0324875

	Department of the Treasury Attach to Form 990. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Public Inspection
Nam	e of the organization						r identification num
	-	Living Water	Inter	national		7	76-0324875
Pa	rt I Types of	f Property				L	
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) d of determining ontribution amounts
1	Art - Works of art						
2	Art - Historical trea	asures					
3		erests					
4		ations					
5	Clothing and hous	ehold goods					
6	Cars and other ve	hicles					
7							
8		ty					
9		ly traded		20	647,296.	FMV	
10		y held stock					
11	Securities - Partne	ership, LLC, or					
	trust interests						
12	Securities - Miscel	laneous					
13	Qualified conserva	ation contribution -					
	Historic structures	s					
14	Qualified conserva	ation contribution - Other					
15	Real estate - Resid	dential					
16	Real estate - Com	mercial					
17		r					
18	Collectibles						
19							
20		I supplies					
21							
22	Historical artifacts						

22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (Auction items)	Х	62	21	,914.	Sale procee	ds		
26	Other (Cryptocurr.)	Х	1	20	,003.	FMV			
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions					
	for which the organization completed Form 828	3, Part V, D	onee Acknowledge	ement	29			0	
								Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, line	s 1 throug	h 28, that it			
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for									
	exempt purposes for the entire holding period?			·			30a		Х
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	olicy that re	quires the review o	of any nonstandard	l contribut	tions?	31	Х	

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

32a

Х

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M, Line 32b:

Living Water International uses a processing firm to receive and

liquidate donations of cryptocurrency.

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990- Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	·EZ	OMB No. 1545-0047
Form 990 or 990-E2 or to provide any additional information. Department of the Treasury Attach to Form 990 or Form 990-EZ. Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.			Open to Public Inspection
Name of the organization	Living Water International		identification number 324875
Form 990 Par		324073	

Living Water International (Living Water) exists to demonstrate the

love of God by helping communities in 18 developing countries acquire

desperately needed clean water and to experience "living water" - the

gospel of Jesus Christ.

Form 990, Part V, Line 4b, List of Foreign Countries:

Burkina Faso, Kenya, Zambia, Liberia,

Rwanda, Sierra Leone, Uganda, Honduras,

Guatemala, Mexico, Haiti, Nicaragua

Form 990, Part VI, Section A, line 1a:

Executive Committee: The Executive Committee consists of the President/CEO, CFO/Treasurer, and two board members to be elected by the Board to serve a term of twelve months; it meets to conduct the business of Living Water International (LWI). The Executive Committee, to the extent provided in said resolution, has the authority of the Board of Directors in the management of LWI. However, no such committee has the authority to repeal the Bylaws; elect, appoint or remove any member of any such committee or any Director or Officer; amend the Articles of Incorporation; adopt a plan of merger or adopt a plan of consolidation with another corporation; authorize the voluntary dissolution of LWI or revoke proceedings therefor; adopt a plan for the distribution of the assets of the corporation; or to amend, alter or repeal any resolution of the Board of Directors which by its terms provides that it may not be amended, altered or repealed by such committee. All actions of the Executive Committee must be reported at the LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 232211 10-28-22

Schedule O (Form 990) 2022	Page 2
Name of the organization Living Water International	Employer identification number $76-0324875$
next following meeting of the Board of Directors, which ma	y veto or
overturn any committee action as to matters not yet perfor	med or to which
the corporation has not been obligated by contract by a th	ree fourths vote
of Directors present at a Board of Directors meeting in wh	ich at least a

quorum is established.

Form 990, Part VI, Section A, line 4:

During the tax year, Living Water amended its Bylaws to address the

reimbursement of accountable program expenses incurred by directors.

Form 990, Part VI, Section B, line 11b:

The audit review committee is given a draft of Form 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 with the IRS.

Form 990, Part VI, Section B, Line 12c:

Living Water makes a point of not having Board members who have 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, sign and return it declaring that no conflicts of interest exist.

Form 990, Part VI, Section B, Line 15:

The Executive Committee of the Board of Directors, without the

President/CEO present, sets the President/CEO's salary 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 232212 10-28-22 Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization Living Water International	Employer identification number 76-0324875
evaluation.	
Living Water has a Global Compensation Philosophy that ens	ures all staff
are paid appropriately. Living Water participates in annua	l salary surveys
that are used to review its pay scales to ensure competitiv	veness for
recruitment and staff retention. Annually, Living Water bu	dgets for merit
increases which are tied to performance evaluations for al	l staff including
Officers, Key Employees and the President/CEO. Annual perf	ormance
evaluation results determine what, if any, increase is give	en to employees.
Form 990, Part VI, Line 17, List of States receiving copy	of Form 990:
AL, AK, AR, CA, CO, CT, FL, GA, HI, IN, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO	O, NH, NJ, NM, NY, NC
OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI	
Form 990, Part VI, Section C, Line 19:	
Audited financial statements are published on the Living Wa	ater website.
Governing documents and the conflict of interest policy are	e provided upon
request.	

SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number 76-0324875

Department of the Treasury Internal Revenue Service

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

Name of the organization

Living Water International

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Water Implementations, LLC - 86-3131830 4001 Greenbriar Dr.	_				Living Water
Stafford, TX 77477	Water projects funding	Texas	1,098,543.		International
	_				
	_				
	_				

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
Living Water Service Centre							
PO Box 404-00621 Village Market	Water Wells - WASH -				Living Water		
Nairobi, KENYA	Church Mobilization	Kenya	501(c)(3)	Line 7	International	X	
Living Water Zambia							
PO Box 414, P/BE10 Arcades	Water Wells - WASH -				Living Water		
Lusaka, ZAMBIA	Church Mobilization	Zambia	501(c)(3)	Line 7	International	X	
Foundation Living Water Int'l							
3, Lilavois 33, #3 Route Prolongee	Water Wells - WASH -				Living Water		
Crois des Bouquets, HAITI	Church Mobilization	Haiti	501(c)(3)	Line 7	International	X	
Living Water International							
Tower Hill, PO Box 1279	Water Wells - WASH -				Living Water		
Monrovia, LIBERIA	Church Mobilization	Liberia	501(c)(3)	Line 7	International	x	

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

Schedule R (Form 990) 2022

Part II Continuation of Identification of Related Tax-Exempt Organizations

(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	(f) Direct controlling entity		g) 512(b)(10 rolled zation?
				501(c)(3))		Yes	No
LW Internacional AC Puebla MX							
37 Melchor Ocampo	Water Wells - WASH -				Living Water		
Momoxpa Puebla, MEXICO	Church Mobilization	Mexico	501(c)(3)	Line 7	International	X	
Living Water International Rwanda							
PO Box 6712	Water Wells - WASH -				Living Water		
Kigali, RWANDA	Church Mobilization	Rwanda	501(c)(3)	Line 7	International	X	
Living Water Int'l Sierra Leone							
New Steps Ctr, Waterloo Hwy	Water Wells - WASH -				Living Water		
Waterloo, Koya Rural Dist, SIERRA LEONE	Church Mobilization	Sierra Leone	501(c)(3)	Line 7	International	X	
LWI Uganda							
PO Box 30463, Clock Tower	Water Wells - WASH -				Living Water		
Kampala, UGANDA	Church Mobilization	Uganda	501(c)(3)	Line 7	International	Х	
Living Water International							
Parque Arlan Siu, 100mts	Water Wells - WASH -				Living Water		
Managua, Abajo, NICARAGUA	Church Mobilization	Nicaragua	501(c)(3)	Line 7	International	X	
Living Water Africa Region							
PO Box 21863-00505	Water Wells - WASH -				Living Water		
Nairobi, KENYA	Church Mobilization	Kenya	501(c)(3)	Line 7	International	X	
Living Water International Guatemala							
Calle Real, Lote 2, Apto. B, SPLH	Water Wells - WASH -				Living Water		
Antigua, GUATEMALA	Church Mobilization	Guatemala	501(c)(3)	Line 7	International	x	
Living Water Int'l El Salvador							
89 Ave NCM #102, Edificio World Ctl	Water Wells - WASH -				Living Water		
San Salvador, EL SALVADOR	Church Mobilization	El Salvador	501(c)(3)	Line 7	International	x	
Living Water International Honduras							
Avenida Dionisio de Herrera	Water Wells - WASH -				Living Water		
Ciudad de la Ceiba, HONDURAS	Church Mobilization	Honduras	501(c)(3)	Line 7	International	x	
LWI Burkina Faso						1	
09 BP 835	Water Wells - WASH -				Living Water		
Ouagadougou, BURKINA FASO	Church Mobilization	Burkina Faso	501(c)(3)	Line 7	International	x	
Living Water International (Angola)							
4001 Greenbriar Dr	Water Wells - WASH -				Living Water		
Stafford, TX 77478	Church Mobilization	Angola	501(c)(3)	Line 7	International	x	

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.

	r an	· ,									
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	redominant income related, unrelated, uded from tax under Share of total income allocations? Share of total end-of-year assets Disproportionate allocations?			Genera manag partne	l or Percentage ^{ing} ownership		
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
	1										
	1		1			1	1	1	1		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if 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	(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	ent	(i) ction (b)(13) trolled tity?
		country)						Yes	No
								1	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es M
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)		X	<u>۲</u>
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			_
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)			
i Exchange of assets with related organization(s)			
j Lease of facilities, equipment, or other assets to related organization(s)			_
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)		X	ζ
m Performance of services or membership or fundraising solicitations by related organization(s)			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
o Sharing of paid employees with related organization(s)			_
p Reimbursement paid to related organization(s) for expenses			
q Reimbursement paid by related organization(s) for expenses			
r Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved
(1) Living Water Zambia	В	3,255,792.	Cash
(2) LWI Burkina Faso	В	237,509.	Cash
(3) Living Water Service Centre	В	794,961.	Cash
(4) Living Water International	В	812,924.	Cash
(5) Living Water International Rwanda	В	762,242.	Cash
(6) Living Water Int'l Sierra Leone	В	406,178.	Cash

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) LWI Uganda	В	743,714.	Cash
(8) Living Water Africa Region	В	461,730.	Cash
(9) Living Water International Guatemala	В	532,001.	Cash
(10) Foundation Living Water Int'l	В	1,092,061.	Cash
(11) Living Water International Honduras	В	674,585.	Cash
(12) LW Internacional AC Puebla MX	В	1,133,752.	Cash
(13) Living Water International	В	632,307.	Cash
_ (14)			
_ (15)			
_ (16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Schedule R (Form 990) 2022 Living Water International

Part VI Unrelated Organizations Taxable as a Partnership. Complete if 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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e Are partner 501(o org:		(f) Share of total income	(g) Share of end-of-year assets	Dispr tior alloca	n) opor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	(k) Percentage ownership
		country	sections 512-514)	Yes	No	income	455615	Yes	No	(Form 1065)	Yes NC	

Schedule R (Form 990) 2022

t VII	Supplemental	Information
-------	--------------	-------------

Provide additional information for responses to questions on Schedule R. See instructions.

Form 990/990-EZ/990-PF	Form 990-T
Exported on 03/28/2024 15:18:01	
Form 990	