** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning and en	ding					
	heck if	C Name of organization		D Employer identif	fication number			
X	Addres	WATER FOUNDATION						
	Name change			37-18339	985			
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address) Ro 3335 WATT AVE.	om/suite	E Telephone numb (916) 41				
	√return termin- ated			G Gross receipts \$	25,984,608.			
	Ameno	3		H(a) Is this a group				
	Application	F Name and address of principal officer: ALLISON HARVEY TURNE	R	for subordinates? Yes X No				
	pendin	SAME AS C ABOVE		H(b) Are all subordinates	included? Yes No			
<u> 1 T</u>	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or [527	If "No," attach	a list. See instructions			
	Vebsit			H(c) Group exempti				
		organization: X Corporation Trust Association Other	L Year o	of formation: 2016	M State of legal domicile: CA			
Ра		Summary						
ø		Briefly describe the organization's mission or most significant activities: SECURE						
Governance		RESTORE AND SUSTAIN FRESHWATER ECOSYSTEMS,						
ern		Check this box if the organization discontinued its operations or disposed		1 _				
Ĝo		Number of voting members of the governing body (Part VI, line 1a)		<u>3</u>	1			
8		Total number of individuals employed in calendar year 2022 (Part V, line 2a)						
Activities &		Total number of volunteers (estimate if necessary)						
ίvi		Total unrelated business revenue from Part VIII, column (C), line 12						
Ā		Net unrelated business taxable income from Form 990-T, Part I, line 11			_			
				Prior Year	Current Year			
•	8	Contributions and grants (Part VIII, line 1h)		14,649,347.	25,725,183.			
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.			
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		30,171.				
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		158,460.	201,716.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		14,837,978.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,282,671.	8,565,687.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.				
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,076,301.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
хbе	b	Total fundraising expenses (Part IX, column (D), line 25) 102, 117	_	2 560 550	4 422 225			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,560,572.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		<u>11,919,544.</u>				
s		Revenue less expenses. Subtract line 18 from line 12	Por	2,918,434.				
ts ol	20 21 22	Tabel access (Dort V. Bra. 10)		24,031,910.				
\sse Bala	20	Total assets (Part X, line 16)		3,856,965				
Vet/	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		20,174,945				
Pa	rt II	Signature Block		20,1,1,515	23/170/0030			
		ties of perjury, I declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best of m	nv knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of which			,			
Sigr	1	Signature of officer		Date				
Her		LIZETTE LECLERC, DIR OF FINANCE & OPS						
		Type or print name and title						
		Print/Type preparer's name MAGA E. KISRIEV Preparer's forture		ate Check	PTIN			
Paid			1	0/25/23 self-empl				
Prep	arer	Firm's name HOOD & STRONG LLP		Firm's EIN	94-1254756			
Use	Only	Firm's address 60 SO. MARKET ST, STE 200						
		SAN JOSE, CA 95113		Phone no. 4 (08.998.8400			
May	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No			

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print WATER FOUNDATION 37-1833985 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 555 CAPITOL MALL, 1155 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions SACRAMENTO, CA 95814 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ 01 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) LIZETTE LECLERC Telephone No. ► (916) 414-3310 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. NOVEMBER 15, 2023, to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or ___ tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

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For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

Total program service expenses

Form 990 (2022) WATER FOUNDATION 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
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		Х
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ū	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	١		
U				X
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		 ₩
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		37	
	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?			l
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
Ч	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	1.0		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		_
•	the organization's separate of consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
10-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		- 21	\vdash
ıza	, ,	40-	Х	
	Schedule D, Parts XI and XII	12a	21	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		_v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		-
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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		<u> </u>
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			l
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
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		<u> </u>
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		X
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		X
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		Х
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			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
		-		-

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Form 990 (2022) WATER FOUNDATION
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
	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		
	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	25a		х
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		25
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	, ,	25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	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		х
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		Х
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		X
С	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		X
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			7.7
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		х
25.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
•	If "Yes," complete Schedule R, Part V, line 2	36		х
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		Х
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	Note: All Form 990 filers are required to complete Schedule O To 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			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 54	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		77	
	(gambling) winnings to prize winners?	1c	X	(2022)

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Form 990 (2022) WATER FOUNDATION

Part 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 23								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х					
b	If "Yes," enter the name of the foreign country								
	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		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с							
6a	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		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x					
	to file Form 8282?								
d	,								
е	, , , , , , , , , , , , , , , , , , , ,								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
_	sponsoring organization have excess business holdings at any time during the year?	8							
9									
a	, , , , , , , , , , , , , , , , , , , ,								
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a								
a 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:								
	Gross income from members or shareholders								
-	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							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
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								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
b									
15	15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?								
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
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							
	If "Yes," complete Form 6069.								

WATER FOUNDATION 37-1833985 Page 6 Form 990 (2022) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 8 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? Х 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed __CA , AR , DC , MN , CO , WA , MD , MI Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website X Upon request Another's website ___ Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records LIZETTE LECLERC - (916) 414-3310

3335 WATT AVE., B, SACRAMENTO, CA 95821

Form **990** (2022)

232006 12-13-22

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.

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

- 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.

(A) Name and title	(B) Average	(C) Position (do not check more than one		(D) Reportable	(E) Reportable	(F) Estimated				
Name and the	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated translated smployee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) ALLISON HARVEY TURNER	37.50									
CHIEF EXECUTIVE OFFICER		Х		Х				304,292.	0.	37,759.
(2) LIZETTE LECLERC	37.50	<u> </u>								
DIRECTOR OF FINANCE AND OPERATIONS				Х				219,178.	0.	28,128.
(3) JENNIFER SOKOLOVE	37.50]							_	
DIRECTOR OF PROGRAMS & STRATEGY						Х		207,931.	0.	37,354.
(4) NICOLE VERHOFF	37.50]							_	
DIRECTOR OF STRATEGIC PARTNERSHIPS	<u> </u>					X		206,810.	0.	31,941.
(5) ANDREW FAHLUND	37.50	1						104 450		
SENIOR PROGRAM OFFICER						Х		191,458.	0.	22,283.
(6) ALEXANDRA PAXTON	37.50	4				l		1.60 4.60		00 610
PROGRAM OFFICER	25 50		_			Х		160,463.	0.	20,613.
(7) ELIZABETH SODERSTROM	37.50	4						155 200		02 506
STRATEGIC PARTNERSHIPS OFFICER	1 00		_			X		155,322.	0.	23,506.
(8) JIM LOCHHEAD	1.00	٠,,		,,						
CHAIRMAN, PRESIDENT	1 00	Х	_	Х				0.	0.	0.
(9) CELESTE CANTU	1.00	х		37					_	_
VICE CHAIR	1 00	X	_	Х				0.	0.	0.
(10) LAURIE DACHS SECRETARY	1.00	Х		х				0.	0.	_
(11) DAVID BECKMAN	1.00	^		^				0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(12) JOHN ECHOHAWK	1.00	^						· ·	0.	· ·
DIRECTOR	1.00	Х						0.	0.	0.
(13) HAHRIE HAN	1.00	25						•	0.	•
DIRECTOR	1.00	x						0.	0.	0.
(14) MOIRA MCDONALD	1.00							•	•	•
DIRECTOR	1100	x						0.	0.	0.
(15) PETER SILVA	1.00									
DIRECTOR		Х						0.	0.	0.
		1								
										- 000 (sasa)

WATER FOUNDATION

Part VII Section A. Officers, Directors, Trust	tees, Key Emp	ploy	ees,	and	l Hi	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)	(C)					(D)	(E)	(F)			
Name and title	Average	(do		Posi neck i		າ than d	ne	Reportable Reporta			Estimat	ed
	hours per	box	, unles	ss per	rson i	is both	an	compensation	compensatio		amount	of
	week		Jer an	uau	recid	Tritus	ee)	from	from related		other	
	(list any hours for	irecto						the	organization		compens	
	related	ord	ee Ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)	,0/	from th	
	organizations	rustee	trust		ee ee	ubeu		1099-NEC)	1099-1120)		organiza and rela	
	below	dual t	rtio na	_	nploy	st cor	.	1000 1120)			organizat	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				9	
		_	_		_							
		ł										
										$-\!\!\!+$		
1b Subtotal								1,445,454.			201,5	84.
c Total from continuation sheets to Part VII	, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								1,445,454.		0.	201,5	84.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	!		
compensation from the organization											1	10
											Yes	No
3 Did the organization list any former officer,	,	,	,	•	,	,	_	• •	,		-	37
line 1a? If "Yes," complete Schedule J for st											3	X
4 For any individual listed on line 1a, is the su	•							•	•		4 X	
and related organizations greater than \$150											4 X	
5 Did any person listed on line 1a receive or a					•			· ·	lual for services		5	Х
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	piete Scheaule	9 <i>J T</i>	or su	icn ŗ	oers	on .					5	
Complete this table for your five highest cor	mnensated ind	lene	nder	nt cc	ontra	actor	s th	nat received more than \$	100 000 of comp	ensatio	n from	
the organization. Report compensation for t										orioatio		
(A)	,			<u> </u>				(B)			(C)	
Name and business	address							Description of s	ervices	Cor	npensatio	n n
SUSAN BELL & ASSOCIATES,	LLC											
570 OAK KNOLL LANE, MENLO	STRATEGY CONS	SULTING		984,8	89.							
PYRAMID COMMUNICATIONS, INC COMMUNICATIONS									NS			
L932 1ST AVE, SUITE 507, SEATTLE, WA 98101 CONSULTING 711,676.												
CONSERVATION STRATEGY GRO												
PO BOX 18318, SACRAMENTO, CA 95819 STRATEGY CONSULTING 120,000.												
NVG, LLC												
66 MULLIGAN DR., PALMYRA, VA 22963 STRATEGY CONSULTING 120,000.								00.				

Form **990** (2022)

119,189.

Total number of independent contractors (including but not limited to those listed above) who received more than

PO BOX 29392, OAKLAND, CA 94604

\$100,000 of compensation from the organization

TECHNICAL CONSULTING

37-1833985

Form 990 (2022)

Part VI		Statement	of I	Revenue

			Check if Schedule O contains a response	or note to any lin	a in this Dart VIII			
			Check if Schedule O Contains a response	or note to any iin	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenuè excluded
						function revenue	business revenue	from tax under sections 512 - 514
	_	_	Following designs and the second seco					300010113 0 12 0 14
ants	'		Federated campaigns 1a					
G G			Membership dues 1b					
ts, An			Fundraising events 1c					
ije ij			Related organizations 1d					
ns, Sir			Government grants (contributions) 1e					
utio ier (T	All other contributions, gifts, grants, and	25 725 193				
iri Otto			similar amounts not included above 1f	25,725,183.				
Contributions, Gifts, Grants and Other Similar Amounts		•	Noncash contributions included in lines 1a-1f		25,725,183.			
<u>O</u> 8		n	Total. Add lines 1a-1f	Business Code	23,723,103.			
	_			Busiliess Code				
ice	2	a						
er, ue		b						
m S ven		C						
gra Re		d						
Program Service Revenue		e	All other program service revenue					
_			Total. Add lines 2a-2f					
	3		Investment income (including dividends, intere					
	ľ		other similar amounts)		57,709.			57,709.
	4		Income from investment of tax-exempt bond p		, -			, -
	5		Royalties					
	Ĭ		(i) Real	(ii) Personal				
	6	а	Gross rents 6a 144,801.	()				
	Ĭ		Less: rental expenses 6b 0.					
			Rental income or (loss) 6c 144,801.					
			Net rental income or (loss)		144,801.			144,801.
	7		Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
		b	Less: cost or other basis					
e			and sales expenses 7b					
Revenue		С	Gain or (loss) 7c					
Rev			Net gain or (loss)					
er	8		Gross income from fundraising events (not					
₹			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 188a					
		b	Less: direct expenses8b					
			Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
			Part IV, line 19					
		b	Less: direct expenses 9b					
		С	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a	a				
		b	Less: cost of goods sold10k					
		С	Net income or (loss) from sales of inventory					
Ø				Business Code	= :	_		
eou Je	11	а	OTHER INCOME	900099	56,915.	56,915.		
lan.		b						
Miscellaneous Revenue		C						
Mis			All other revenue		EC 01F			
			Total. Add lines 11a-11d		56,915. 25,984,608.	56 015	0.	202 510
	12		Total revenue. See instructions		43,304,000.	56,915.	<u> </u>	202,510.

232009 12-13-22

04	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
Secti				npiete column (A).	X						
_	Check if Schedule O contains a respon	(A)	this Part IX	(C)	(D)						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	8,565,687.	8,565,687.								
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22										
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees	589,358.	445,776.	130,351.	13,231.						
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	2,340,835.	1,770,551.	517,733.	52,551.						
8	Pension plan accruals and contributions (include	, , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,							
-	section 401(k) and 403(b) employer contributions)	185,660.	140,429.	41,063.	4.168.						
9	Other employee benefits	566,201.	428,261.	125,229.	4,168. 12,711.						
10	Payroll taxes			==,-==	,· 						
11	Fees for services (nonemployees):										
	Management										
	Legal	56,886.	48,350.	7,970.	566.						
	Accounting	585.		143.	9.						
	Lobbying	70,400.		1131							
	Professional fundraising services. See Part IV, line 17	7071000	707100								
	Investment management fees										
'	Other. (If line 11g amount exceeds 10% of line 25,										
y	column (A), amount, list line 11g expenses on Sch 0.)	3,370,563.	3,274,237.	90,331.	5,995.						
40		3,370,303	3,214,2316	50,551.	3,333.						
12	Advertising and promotion	33,418.	23,856.	8,985.	577.						
13	Office expenses	49,400.		13,585.	855.						
14	Information technology	40,400	34,500.	13,303.	033•						
15	Royalties	559,322.	296,604.	255,040.	7,678.						
16	Occupancy	63,179.		9,232.	1,024.						
17	Travel	05,119.	32,323.	9,232•	1,024•						
18	Payments of travel or entertainment expenses										
40	for any federal, state, or local public officials	102,584.	74,295.	27,917.	372.						
19	Conferences, conventions, and meetings	104,304.	14,433.	41,311.	314.						
20	Interest										
21	Payments to affiliates	70,857.	50,526.	19,009.	1,322.						
22	Depreciation, depletion, and amortization	7,499.	50,526.	2,345.	1,322.						
23	Insurance Other average Itamize average not solvered	1,433.	5,040.	4,343.	100.						
24	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.)	25 607	26 010	0 100	601						
a	DUES AND SUBSCRIPTION	35,697.		8,188.	691.						
b	FEES	13,417.	9,786.	3,3/0.	261.						
C											
d											
	All other expenses	16 601 540	15 210 040	1 260 401	100 110						
<u>25</u>	Total functional expenses. Add lines 1 through 24e	16,681,548.	15,318,940.	1,260,491.	102,117.						
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)				000						

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			413,529.	1	626,872.
	2	Savings and temporary cash investments			17,848,302.	2	21,180,217.
	3	Pledges and grants receivable, net			5,318,096.	3	8,233,101.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	ostantial c	ontributor, or 35%			
		controlled entity or family member of any of the	nese perso	ons		5	
	6	Loans and other receivables from other disqu	alified per				
		under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
_ω	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
¥	9	B			56,601.	9	80,169.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	479,211. 381,686.			
	b	Less: accumulated depreciation	168,382.	10c	97,525.		
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			227,000.	15	924,460.
	16	Total assets. Add lines 1 through 15 (must ed			24,031,910.	16	31,142,344.
	17	Accounts payable and accrued expenses			765,253.	17	790,522.
	18	Grants payable	3,026,775.	18	165,957.		
	19	Deferred revenue	64,937.	19	0.		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D		21	
န္	22	Loans and other payables to any current or fo	rmer offic	er, director,			
Liabilities		trustee, key employee, creator or founder, sub					
jab		controlled entity or family member of any of the	nese perso	ons		22	
-	23	Secured mortgages and notes payable to unre		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,	. ,				
		parties, and other liabilities not included on lin	ies 17-24)	. Complete Part X	•		E0E 060
		of Schedule D			0.		707,860.
	26	Total liabilities. Add lines 17 through 25			3,856,965.	26	1,664,339.
ر س		Organizations that follow FASB ASC 958, c	heck her	e X			
Š		and complete lines 27, 28, 32, and 33.			10 070 000		10 014 F46
alar	27	Net assets without donor restrictions			10,879,808.	27	10,814,546.
Ä	28	Net assets with donor restrictions			9,295,137.	28	18,663,459.
٦		Organizations that do not follow FASB ASC	958, che	ck here			
느		and complete lines 29 through 33.					
ış	29	Capital stock or trust principal, or current fund				29	
sse	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			20 174 045	31	20 470 005
ž	32	Total net assets or fund balances			20,174,945.	32	29,478,005.
	33	Total liabilities and net assets/fund balances			24,031,910.	33	31,142,344.

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	25,98				
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,68				
3	Revenue less expenses. Subtract line 2 from line 1	3	9,30				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))						
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain 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 29						
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
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:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	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 require						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			Forr	n 990	(2022)		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization WATER FOUNDATION 37-1833985 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

(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	tion 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.")	9157600.	14201584 .	14821000.	14649347.	<u> 25725183.</u>	78554714.
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	Total. Add lines 1 through 3	9157600.	<u>14201584.</u>	14821000.	14649347.	25725183.	78554714.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						52514942.
6	Public support. Subtract line 5 from line 4.						26039772.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	9157600.	14201584.	14821000.	14649347.	<u>25725183.</u>	78554714.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	79,768.	197,721.	181,576.	182,430.	202,510.	844,005.
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.)						
11	Total support. Add lines 7 through 10						79398719.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	141,635.
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	tion C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	32.80 %
	Public support percentage from 2021					15	37.55 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, chec	ck this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u> </u>
						Schedule A	(Form 990) 2022

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.)

Sed	ction A. Public Support	siow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	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						
	Amounts included on lines 1, 2, and 3 received from disqualified 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						
8	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	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						
c	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						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

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.)

	Yes	No
1		
2		
3a		
3b		
_		
3c		
_		
4a		
Al-		
4b		
4c		
70		
5a		
5b		
5c		
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8		
9a		
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9b		
9с		
10a		
10b		
A /Farm	~ ^^^	2022

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ı uı	Continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
_	11c below, the governing body of a supported organization?		
h	A family member of a person described on line 11a above?	1	
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
C			
Sac	<u>detail in</u> Part VI. 11c tion B. Type I Supporting Organizations		
	tion B. Type I Supporting Organizations	T.,	Τ
		Yes	No
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? If "No," describe in Part VI how the supported organization(s)		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported		
	organization, describe how the powers to appoint and/or remove 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.	\bot	
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,		
	supervised, or controlled the supporting organization.		
Sec	tion C. Type II Supporting Organizations		
		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1.00	110
•	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		
800	the supported organization(s). 1 tion D. All Type III Supporting Organizations		
	Tion B. All Type in Supporting Organizations	T.,	Τ
		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?	\bot	
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).		
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.		
Sec	tion E. Type III Functionally Integrated Supporting Organizations		•
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>		
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction)	nel	
2	Activities Test. Answer lines 2a and 2b below.	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1.03	10
а			
	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	, ,		
	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.		
а	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.		

	the transport of the state of t	aa Ouaani		7-1633963 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifyi		•	Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations must ion A - Adjusted Net Income	st complete s	Sections A through E. (A) Prior Year	(B) Current Year (optional)
				(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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	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		
Sect	ion 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			
	emergency temporary reduction (see instructions).	6		

Schedule A (Form 990) 2022

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

instructions).

Schedule A (Form 990) 2022

d Excess from 2021e Excess from 2022

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number

WATER FOUNDATION 37-1833985

Organization type (check one):						
Filers of	:	Section:				
Form 990 or 990-EZ		\overline{X} 501(c)($\overline{3}$) (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 . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special l	Rules					
	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					
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).				

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2**

Name of organization

Employer identification number

WATER	FO	\mathtt{UND}	ITA	ON
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37-1833985

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 5,650,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,000,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>4,250,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>1,750,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_		\$ <u>1,025,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$3,200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022) Page **2**

Name of organization Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

37-1833985

WATER FOUNDATION

Page 3

WATER FOUNDATION

37-1833985

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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
—			
453 11-15-		<u> </u>	Schedule B (Form 990) (202

Page 4

Name of organization **Employer identification number** WATER FOUNDATION 37-1833985 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Internal Revenue Service

Department of the Treasury

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Em	ployer identification number
_		OUNDATION			37-1833985
Pa	art I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			
Pa	art I-B Complete if the org	anization is exempt und	ler section 501(c)(3).	
1	Enter the amount of any excise tax	-		-	\$
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 4955		\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 501	(c)(3).
	Enter the amount directly expended	, , ,	•		\$
2	Enter the amount of the filing organ				
	exempt function activities				\$
3	Total exempt function expenditures				
	line 17b				
4	3 3				
5	Enter the names, addresses and en made payments. For each organiza	• •	•		~ ~
	contributions received that were pro-	•	0 0		•
	political action committee (PAC). If			•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

	FOUNDATION		833985 Page 2
Part II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and file	ed Form 5768 (ele	ction under
expenses, and share of excess	gs to an affiliated group (and list in Part IV each affiliated as lobbying expenditures). ked box A and "limited control" provisions apply.	group member's name	, address, EIN,
Limits on Lob	bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)	66,950.	
b Total lobbying expenditures to influence a le	gislative body (direct lobbying)	466,725.	
c Total lobbying expenditures (add lines 1a an	d 1b)	533,675.	
d Other exempt purpose expenditures		16,147,873.	
e Total exempt purpose expenditures (add line	16,681,548.		
f Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	984,077.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% o	f line 1f)	246,019.	
h Subtract line 1g from line 1a. If zero or less,	enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j If there is an amount other than zero on either	er line 1h or line 1i, did the organization file Form 4720	_	
reporting section 4911 tax for this year?			Yes No
` •	4-Year Averaging Period Under Section 501(h) a section 501(h) election do not have to complete all e the separate instructions for lines 2a through 2f.)	of the five columns be	low.
Lob	bying Expenditures During 4-Year Averaging Period		

	Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total		
2a Lobbying nontaxable amount	690,706.	724,220.	745,977.	984,077.	3,144,980.		
b Lobbying ceiling amount (150% of line 2a, column(e))					4,717,470.		
c Total lobbying expenditures	301,314.	317,972.	281,031.	533,675.	1,433,992.		
d Grassroots nontaxable amount	172,677.	181,055.	186,494.	246,019.	786,245.		
e Grassroots ceiling amount (150% of line 2d, column (e))					1,179,368.		
f Grassroots lobbying expenditures	48,318.	59,672.	39,665.	66,950.	214,605.		

Schedule C (Form 990) 2022

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For ϵ	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
9					
n	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	• • •				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? † III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5).	or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section		3	1	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	cal			
а	Current year		2a		
	Carryover from last year		2b		
С	Total		2c		
3	4		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group uctions); and Part II-B, line 1. Also, complete this part for any additional information.	list); Part II-A, I	ines 1 a	nd 2 (See	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Inspection

Name of the organization WATER FOUNDATION **Employer identification number** 37-1833985

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		s or Acco	ounts. Complete if the
	organization answered 155 on 10111 555, 1 are 10, inte	(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 w	vriting that the assets held in donor advi	sed funds	
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or	· ·	-	
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990	, Part IV, lin	e 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	ion or education) Preservation	of a historic	ally important land area
	Protection of natural habitat			d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution in the form	of a conse	ervation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru			2c
	Number of conservation easements included in (c) acquired at			
	historic structure listed in the National Register		2	2d
3	Number of conservation easements modified, transferred, rele			ion during the tax
	year	,	•	· ·
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	-	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserv	ation easen	nents during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170)(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financial staten	nents that c	lescribes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Sim	ilar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement	and balanc	e sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in t	furtherance	of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these iter	ms.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and	balance sh	neet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of	public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(m) 4			100 000
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financi	al gain, pro	vide
	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2022

232051 09-01-22

	rt III Organizations Maintaining Co		t. Histo	orical Tre	asures. o	r Other			(conti		age 🗲
3	Using the organization's acquisition, accession								COITUI	iueu)	
Ü	collection items (check all that apply):	n, and other record	3, 011001	arry or tire i	Ollowing that	Thanc sig	i iiioai ii c	130 01 113			
а	Public exhibition	c		l nan or exc	hange progra	am					
b	Scholarly research	6			FICE D		V				
C	Preservation for future generations	•		Other	1101 1.	101 111					
4	Provide a description of the organization's coll	lections and evolai	n how th	av furthar th	e organizatio	n'e avam	nt nurnos	a in Dart	YIII		
5	During the year, did the organization solicit or							oc IIII ait.	AIII.		
3	to be sold to raise funds rather than to be mail								Yes	X	No
Par	rt IV Escrow and Custodial Arrang										
	reported an amount on Form 990, Part		010 11 1110	, organizatio	ir anoworda	100 0111	01111 000	,	0, 0.		
	Is the organization an agent, trustee, custodia	n or other intermed	liary for o	contributions	s or other ass	sets not in	cluded				
	on Form 990, Part X?		•						Yes		No
b	If "Yes," explain the arrangement in Part XIII a										,
_									Amoun	t	
С	Beginning balance						1c				
	d Additions during the year										
e											
f	Ending balance						1e 1f				
	Did the organization include an amount on For								Yes		No
	If "Yes," explain the arrangement in Part XIII. (]
	rt V Endowment Funds. Complete if										
		(a) Current year		rior year	(c) Two year			ears back	(e) Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	nt year end balanc	e (line 1	g, column (a)) held as:	•					
а	Board designated or quasi-endowment	•	%		•						
b	Permanent endowment	%	_								
С	Term endowment %	 6									
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%.									
За	Are there endowment funds not in the possess	sion of the organiza	ation tha	t are held ar	nd administer	ed for the					
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the o	organization's endo							,		
Par	rt VI Land, Buildings, and Equipme	ent.									
	Complete if the organization answered	"Yes" on Form 990), Part IV	['] , line 11a. S	ee Form 990	, Part X, li	ne 10.				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	d	(d) Boo	k value	Э
		basis (investr	ment)	basis	(other)	dep	reciation				
1a	Land										
b	Buildings								_	_	
С	Leasehold improvements				6,140.		48,42			7,7	
d	Equipment			26	9,862.	2	00,05	52.	6	9,83	
е	e Other 33,209. 33,209. 0.										

97,525. Schedule D (Form 990) 2022

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

Schedule D (Form 990) 2022 WATER FOUND	ATION	37-1833985 Pa
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" o		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" o		
(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.		
Part IX Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990, Part X, line 15.
Part IX Other Assets. Complete if the organization answered "Yes" of	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15. (b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" of		
Part IX Other Assets. Complete if the organization answered "Yes" of (a) [
Complete if the organization answered "Yes" complete if the organization and the organization a		

(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.

<u>1. </u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	OPERATING LEASE LIABILITY	707,860.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	707,860.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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

Schedule D (Form 990) 2022

Sche	edule D (Form 990) 2022 WATER FOUNDATION		37-	1833985 Page 4
	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per Re		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	-		
1	Total consequences and all consequences are distributed for a sixthetermore.	··	1	25,839,807
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	1 I	-	
e		·	2e	0.
3			3	25,839,807
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			2370337007
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b				
	Other (Describe in Part XIII.) Add lines 4a and 4b			144,801.
			4c 5	25,984,608
5 Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per l		
. u	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	•	iotai	•••
1	Total expenses and losses per audited financial statements		1	16,536,747.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			10,550,747
	·	20		
a	Donated services and use of facilities		-	
b	Prior year adjustments		-	
C	Other losses	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	
d	Other (Describe in Part XIII.)	·		-144,801.
e	Add lines 2a through 2d		2e	16,681,548
3	Subtract line 2e from line 1		3	10,001,540
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	"	_	
b	Other (Describe in Part XIII.)	. 4b		_
	Add lines 4a and 4b		4c	16 601 540
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	16,681,548.
	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add		l; Part	X, line 2; Part XI,
PAI	RT III, LINE 4:			
THI	E ARTWORK IS OF LAKES, RIVERS AND WILDLIFE	•		
PAI	RT X, LINE 2:			
THE	E FOUNDATION IS EXEMPT FROM INCOME TAXES U	NDER INTERNAL REV	ENU	E CODE
(II	RC) SECTION 501(C)(3) AND STATE INCOME TAX	UNDER SECTION 23	701	OF THE
CAI	LIFORNIA REVENUE AND TAXATION CODE. HOWEVE	R, THE FOUNDATION	ııs	REQUIRED
то	FILE FEDERAL AND STATE INFORMATION RETURNS	S.		

AS OF DECEMBER 31, 2022, MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD MAINTAINED ITS TAX-EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO

Schedule D (Form 990) 2022

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Department of the Treasury Internal Revenue Service Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization WATER FOU	Employer identification number $37-1833985$						
Part I General Information on Grants a							37 1033703
Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's process.	stance?					stance, and the selecti	₹
Part II Grants and Other Assistance to recipient that received more than	Domestic Organia	zations and Domesti	c Governments. C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACTIVESGV							
10900 MULHALL STREET EL MONTE, CA 91731	85-2110415	501(C)(3)	20,000.	0.			WATER ACCESS AND CONSERVATION
EL TORTE, ON 31,01	03 2110113	301(0)(0)	20,000.	•			CONDENTITION
AG INNOVATIONS 101 MORRIS STREET, SUITE 212 SEBASTOPOL, CA 95472	68-0462304	501(C)(3)	17,430.	0.			WATER ACCESS AND CONSERVATION
	1		21,222				
ALIANZA COACHELLA VALLEY 1515 6TH STREET							WATER ACCESS AND
COACHELLA, CA 92236	84-1966709	501(C)(3)	55,000.	0.			CONSERVATION
AMERICAN RIVERS, INC. PO BOX 96158 WASHINGTON, DC 20090	23-7305963	501(C)(3)	245,000.	0.			WATER ACCESS AND CONSERVATION
AMIGOS BRAVOS P.O. BOX 238							WATER ACCESS AND
TAOS, NM 87571	85-0363268	501(C)(3)	77,357.	0.			CONSERVATION
ANTHROPOCENE ALLIANCE							
105 NE BAY AVE MICANOPY, FL 32667	81-5166043	501(C)(3)	700,000.	0.			WATER ACCESS AND CONSERVATION
2 Enter total number of section 501(c)(3) a		L	· · · · · · · · · · · · · · · · · · ·		l	l	
3 Enter total number of other organization							

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

Schedule I (Form 990) 2022

37-1833985

WATER FOUNDATION

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUDUBON NEW MEXICO							
PO BOX 9134							WATER ACCESS AND
SANTA FE, NM 87504	13-1624102	501(C)(3)	50,000.	0.			CONSERVATION
CALIFORNIA ENVIRONMENTAL VOTERS							
350 FRANK H OGAWA PLAZA, SUITE 1100							WATER ACCESS AND
OAKLAND, CA 84612	94-3169564	501(C)(4)	130,000.	0.			CONSERVATION
CALIFORNIA TROUT, INC.							WATER ACCESS AND
360 PINE STREET, 4TH FLOOR SAN FRANCISCO, CA 94104	23-7097680	501(C)(3)	45,000.	0.			CONSERVATION
SAN FRANCISCO, CA 54104	23 7037000	301(0/(3/	45,000.	<u> </u>			CONSERVATION
CARPE DIEM WEST							
PO BOX 3008							WATER ACCESS AND
SAUSALITO, CA 94966	94-3373078	501(C)(3)	10,000.	0.			CONSERVATION
CHILDREN OF THE SETTING SUN							
PRODUCTIONS - PO BOX 1571 -							WATER ACCESS AND
BELLINGHAM, WA 98227	47-5005550	501(C)(3)	20,000.	0.			CONSERVATION
CIEA							
PO BOX 2128							WATER ACCESS AND
BERKELEY, CA 94702	27-0861293	501(C)(3)	75,000.	0.			CONSERVATION
			-				
CIVICWELL							
520 CAPITOL MALL, SUITE 440							WATER ACCESS AND
SACRAMENTO, CA 95814	94-2791699	501(C)(3)	50,000.	0.			CONSERVATION
CLEAN WATER FUND							
PO BOX 188							WATER ACCESS AND
MT. CLEMENS, MI 48046	52-1043444	501(C)(3)	250,000.	0.			CONSERVATION
	22 1013111		250,000.	<u> </u>			
COLUMBIA RIVERKEEPER							
РО ВОХ 950							WATER ACCESS AND
HOOD RIVER, OR 97031	91-1583492	501(C)(3)	30,000.	0.			CONSERVATION

Schedule I (Form 990) WATER FOU	NDATION					3	37-1833985 Page 1			
Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COMMUNITIES FOR A BETTER										
ENVIRONMENT (CBE) - 6325 PACIFIC										
BLVD, SUITE 300 - HUNTINGTON PARK,							WATER ACCESS AND			
CA 90255	94-2998086	501(C)(3)	55,800.	0.			CONSERVATION			
COMMUNITY ALLIANCE WITH FAMILY										
FARMERS - PO BOX 363 - DAVIS, CA							WATER ACCESS AND			
95617	94-2914745	501(C)(3)	50,000.	0.			CONSERVATION			
			,							
COMMUNITY REPOWER MOVEMENT										
1405 W. 38TH STREET							WATER ACCESS AND			
LOS ANGELES, CA 90062	84-1775548	501(C)(3)	25,000.	0.			CONSERVATION			
COMMUNITY WATER CENTER										
900 W. OAK AVE	00 0067674	E01/G)/2)	375 000				WATER ACCESS AND			
VISALIA, CA 93291	80-0267674	DUI(C)(3)	375,000.	0.			CONSERVATION			
COMMUNITY WATER CENTER ACTION FUND										
900 W. OAK AVE							WATER ACCESS AND			
VISALIA, CA 93291	80-0267674	501(C)(3)	75,000.	0.			CONSERVATION			
CONFEDERATED TRIBES OF THE			,							
UMATILLA INDIAN RESERVATION -										
46411 TIMINE WAY - PENDLETON, OR							WATER ACCESS AND			
97801	93-0624734	CTUIR	235,000.	0.			CONSERVATION			
CONSERVATION VOTERS NEW MEXICO							L			
200 WEST DE VARGAS STREET, SUITE 1	00 0016055	501 (0) (4)	50.000				WATER ACCESS AND			
SANTA FE, NM 87501	20-0016255	501(C)(4)	50,000.	0.			CONSERVATION			
COUNCIL FOR WATERSHED HEALTH										
177 E. COLORADO BLVD, STE 200							WATER ACCESS AND			
PASADENA, CA 91105	95-4589325	501(C)(3)	50,000.	0.			CONSERVATION			
,			, ,							
EARTH MINISTRY/WASHINGTON										
INTERFAITH POWER & LIGHT - 5515							WATER ACCESS AND			
PHINNEY AVE N - SEATTLE, WA 98103	91-1547974	501(C)(3)	15,000.	0.			CONSERVATION			

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST YARD COMMUNITIES FOR							
ENVIRONMENTAL JUSTICE - 2317 SOUTH							
ATLANTIC BOULEVARD - COMMERCE, CA							WATER ACCESS AND
90040	46-5685097	501(C)(3)	82,100.	0.			CONSERVATION
ENVIRONMENTAL DEFENSE FUND, INC.							
257 PARK AVENUE SOUTH 17TH FLOOR							WATER ACCESS AND
NEW YORK , NY 10010	11-6107128	501(C)(3)	50,000.	0.			CONSERVATION
GENTE ORGANIZADA							
242 EAST 1ST STREET				_			WATER ACCESS AND
POMONA, CA 91767	27-2352500	501(C)(3)	50,000.	0.			CONSERVATION
HEADWATERS ECONOMICS							
PO BOX 7059							WATER ACCESS AND
BOZEMAN, MT 59771	74-3171967	501(C)(3)	200,000.	0.			CONSERVATION
HEAL THE BAY							
1444 9TH STREET							WATER ACCESS AND
SANTA MONICA, CA 90401	95-4031055	501(C)(3)	68,500.	0.			CONSERVATION
LEADERSHIP COUNSEL FOR JUSTICE AND							
ACCOUNTABILITY - 2210 SAN JOAQUIN							WATER ACCESS AND
ST FRESNO, CA 93721	46-1517800	501(C)(3)	150,000.	0.			CONSERVATION
JI. INIBNO, CII JJ721	40 1317000	301(0)(3)	130,000.	••			CONDUCTION
LOS ANGELES ALLIANCE FOR A NEW							
ECONOMY - 464 LUCAS AVE - LOS							WATER ACCESS AND
ANGELES, CA 90017	95-4459427	501(C)(3)	75,000.	0.			CONSERVATION
LOG MARIERA MARINATARA							
LOS ANGELES WATERKEEPER							WARRED AGGRESS 3375
360 E 2ND STREET SUITE 25	05 4	F01 (=) (0)		_			WATER ACCESS AND
LOS ANGELES, CA 90012	95-4444787	501(C)(3)	68,500.	0.			CONSERVATION
MICHIGAN LEAGUE OF CONSERVATION							
VOTERS EDUCATION FUND - 3029							WATER ACCESS AND
MILLER ROAD - ANN ARBOR, MI 48103	37-1430158	501(C)(3)	30,000.	0.			CONSERVATION

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL AUDUBON SOCIETY/AUDUBON							
CALIFORNIA - 225 VARICK STREET -							WATER ACCESS AND
NEW YORK, NY 10014	13-1624102	501(C)(3)	65,000.	0.			CONSERVATION
,			,				
NATURAL RESOURCES DEFENSE COUNCIL,							
INC. (NRDC) - 40 WEST 20TH STREET							WATER ACCESS AND
- NEW YORK, NY 10011	13-2654926	501(C)(3)	120,000.	0.			CONSERVATION
NATURE FOR ALL							
201 WEST GARVEY AVENUE SUITE 102-50							WATER ACCESS AND
MONTEREY PARK, CA 91754	83-1265253	501(C)(3)	68,500.	0.			CONSERVATION
NEW MEXICO ACEQUIA ASSOCIATION							
805 EARLY STREET, SUITE 203B							WATER ACCESS AND
SANTE FE, NM 87505	85-0440606	501(C)(3)	40,000.	0.			CONSERVATION
NEW MENTOS MILDEDNEGO MILTANOS							
NEW MEXICO WILDERNESS ALLIANCE							WARED AGGEGG AND
PO BOX 25464	85-0457916	E01/G)/2)	60 000	0.			WATER ACCESS AND
ALBUQUERQUE, NM 87125	05-045/910	501(C)(3)	60,000.	0.			CONSERVATION
NIMIIPUU PROTECTING THE							
ENVIRONMENT - 1820 NW ARCADIA							WATER ACCESS AND
DRIVE - PULLMAN, WA 99163	47-3465431	501(C)(3)	25,000.	0.			CONSERVATION
			23,333				
NORTH FORK MONO TRIBE							
13396 TOLLHOUSE RD.							WATER ACCESS AND
CLOVIS, CA 93619	02-0588416	501(C)(3)	25,000.	0.			CONSERVATION
·							
NORTHWEST SPORTFISHING INDUSTRY							
ASSOCIATION (NSIA) - PO BOX 4 -							WATER ACCESS AND
OREGON CITY, OR 97045	93-1107831	501(C)(6)	30,000.	0.			CONSERVATION
NW ENERGY COALITION							
811 1ST AVENUE SUITE 305							WATER ACCESS AND
SEATTLE, WA 98104	91-1144122	501(C)(3)	15,000.	0.			CONSERVATION

Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACOIMA BEAUTIFUL							
13520 VAN NUYS BLVD. #200							WATER ACCESS AND
PACOIMA, CA 91331	95-4770745	501 (C) (3)	20,000.	0.			CONSERVATION
PHYSICIANS FOR SOCIAL	33 1770713	301(0)(3)	20,000.				CONDENTITION
RESPONSIBILITY - LOS ANGELES - 617							
s. OLIVE ST, SUITE 1100 - LOS							WATER ACCESS AND
ANGELES, CA 90014	95-3956136	501(C)(3)	55,900.	0.			CONSERVATION
	70 0700100		00,500.				
POLICYLINK							
1438 WEBSTER STREET SUITE 303							WATER ACCESS AND
OAKLAND, CA 94612	94-3297479	501(C)(3)	801,400.	0.			CONSERVATION
,							
PROYECTO PASTORAL							
135 N. MISSION ROAD							WATER ACCESS AND
LOS ANGELES, CA 90033	95-3213958	501(C)(3)	21,700.	0.			CONSERVATION
PUBLIC POLICY INSTITUTE OF		, ,	,				
CALIFORNIA (PPIC) - 500 WASHINGTON							
STREET, STE. 600 - SAN FRANCISCO,							WATER ACCESS AND
CA 94111	94-3207299	501(C)(3)	10,000.	0.			CONSERVATION
			, -				
RESOURCES LEGACY FUND							
555 CAPITOL MALL, SUITE 1095							WATER ACCESS AND
SACRAMENTO, CA 95814	95-4703838	501(C)(3)	50,000.	0.			CONSERVATION
·			,				
RIVER PARTNERS							
580 VALLOMBROSA AVE.							WATER ACCESS AND
CHICO, CA 95926	94-3302335	501(C)(3)	245,000.	0.			CONSERVATION
ROCKEFELLER PHILANTHROPY ADVISORS							
6 WEST 48TH STREET, 10TH FLOOR							WATER ACCESS AND
NEW YORK, NY 10036	13-3615533	501(C)(3)	585,000.	0.			CONSERVATION
·			, , , , , , , , , , , , , , , , , , ,				
RURAL COMMUNITY ASSISTANCE							
CORPORATION - 1725 I ST NW #225 -							WATER ACCESS AND
WASHINGTON, DC 20006	23-7367533	501(C)(3)	350,000.	0.			CONSERVATION

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant or assistance valuation non-cash assistance organization or government if applicable cash grant noncash (book, FMV, assistance appraisal, other) SACRED PLACES INSTITUTE FOR INDIGENOUS PEOPLES (SIERRA HEALTH FOUNDATION) - 1321 GARDEN HIGHWAY WATER ACCESS AND - SACRAMENTO, CA 95833 45-5282243 501(C)(3) 71,900 0. CONSERVATION SAVE OUR WILD SALMON COALITION PO BOX 2202 WATER ACCESS AND REDWAY, CA 95560 68-0259810 501(C)(3) 0. CONSERVATION 69,500 SELF-HELP ENTERPRISES P.O. BOX 6520 WATER ACCESS AND VISALIA, CA 93290 94-1592676 501(C)(3) 50,000 0. CONSERVATION SE'ST'LE P.O. BOX 28850 WATER ACCESS AND 85-3254085 501(C)(3) 0 CONSERVATION BELLINGHAM, WA 98228 25,000 STRATEGIC CONCEPTS IN ORGANIZING & POLICY EDUCATION - 1715 W. FLORENCE AVENUE - LOS ANGELES, CA WATER ACCESS AND 95-4635737 501(C)(3) 0. 90047 50,000 CONSERVATION SUSTAINABLE CONSERVATION 98 BATTERY STREET SUITE 302 WATER ACCESS AND SAN FRANCISCO, CA 94111 94-3232437 501(C)(3) 0. CONSERVATION 50,000 THE CENTER FOR WATER SECURITY AND COOPERATION - 1701 PENNSYLVANIA AVE. NW, STE. 200 - WASHINGTON, DC WATER ACCESS AND 20006 47-4349539 501(C)(3) 20,000 0. CONSERVATION THE NATIONAL JUDICIAL COLLEGE JUDICIAL COLLEGE BUILDING/MS 358 WATER ACCESS AND RENO, NV 89557 94-2427596 501(C)(3) 30,000. 0. CONSERVATION THE TATAVIAM LAND CONSERVANCY 1019 2ND ST WATER ACCESS AND SAN FERNANDO, CA 91340 83-1446244 501(C)(3) 0. CONSERVATION 50,000.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THEODORE ROOSEVELT CONSERVATION PARTNERSHIP - 529 14TH STREET NW,							WATER ACCESS AND		
SUITE 500 - WASHINGTON, DC 20045	04-3706385	501(C)(3)	450,000.	0.			CONSERVATION		
TIDES ADVOCACY									
P.O. BOX 889381							WATER ACCESS AND		
LOS ANGELES, CA 90088	94-3153687	501(C)(4)	150,000.	0.			CONSERVATION		
TREEPEOPLE, INC									
12601 MULHOLLAND DRIVE							WATER ACCESS AND		
BEVERLY HILLS, CA 90210	23-7314838	501(C)(3)	50,000.	0.			CONSERVATION		
TROUT UNLIMITED (TU)									
1777 NORTH KENT STREET, SUITE 100							WATER ACCESS AND		
ARLINGTON, VA 22209	38-1612715	501(C)(3)	796,600.	0.			CONSERVATION		
TULE BASIN LAND & WATER									
CONSERVATION TRUST - 4500 S.									
LASPINA AVENUE, ROOM 103 - TULARE,	05 0056504	501/01/21	05.000				WATER ACCESS AND		
CA 93274	85-0956594	501(C)(3)	25,000.	0.			CONSERVATION		
UNION OF CONCERNED SCIENTISTS									
2 BRATTLE SQUARE							WATER ACCESS AND		
CAMBRIDGE, MA 02138	04-2535767	501(C)(3)	50,000.	0.			CONSERVATION		
WASHINGTON CONSERVATION VOTERS									
1402 THIRD AVENUE SUITE 1400							WATER ACCESS AND		
SEATTLE, WA 98101	91-1548791	501(C)(4)	65,000.	0.			CONSERVATION		
WE THE PEOPLE OF DETROIT									
1520 CHATEAUFORT PLACE							WATER ACCESS AND		
DETROIT, MI 48207	47-5123903	501(C)(3)	150,000.	0.			CONSERVATION		
WESTERN ENVIRONMENTAL LAW CENTER									
120 SHELTON MCMURPHEY BLVD, STE 340							WATER ACCESS AND		
EUGENE, OR 97401	93-1010269	501(C)(3)	40,000.	0.			CONSERVATION		

Schedule I (Form 990)

37-1833985

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESTERN RESOURCE ADVOCATES 2260 BASELINE ROAD, STE. 200 BOULDER, CO 80302	84-1113831	501(C)(3)	50,000.	0.			WATER ACCESS AND CONSERVATION			
WESTERN STATES WATER COUNCIL 682 VINE SUITE 7 MURRAY, UT 84107	93-0551574	wswc	255,000.	0.			WATER ACCESS AND CONSERVATION			
							0.1			

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information red	quired in Part I, lin	e 2; Part III, column	(b); and any other ad	Iditional information.	
PART I, LINE 2:					
WATER FOUNDATION REQUIRES ORGANIZA	TIONS TO	SUBMIT AN	APPLICATIO	N THAT	
INCLUDES A NARRATIVE DESCRIBING TH	E PURPOSE	OF THE PR	ROJECT, ALO	NG WITH AN	
ORGANIZATIONAL BUDGET, PROJECT BUD	GET, AND	FINANCIAL	STATEMENTS	• GRANTEES	
SIGN AN AGREEMENT DESCRIBING ALLOW	ABLE USE	OF FUNDS,	THE GRANT	PERIOD, AND	
REPORTING REQUIREMENTS. ALL GRANTS	REQUIRE	PERIODIC N	NARRATIVE A	ND FINANCIAL	
REPORTS DESCRIBING THE USE OF GRAN	T FUNDS I	NCLUDING A	ACTIVITIES .	AND	
OUTCOMES. ADDITIONALLY, STAFF MAIN					
THE GRANT PERIOD.				-	

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

m 990. tions and the latest information. Open to Public Inspection

Employer identification number

37-1833985

OMB No. 1545-0047

Internal Revenue Service Name of the organization

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

WATER FOUNDATION

Questions Regarding Compensation

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	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)			
b	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	1b		
2	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?	2		
3	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.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	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 must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 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	V-2 and/or 1099-MISO 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) ALLISON HARVEY TURNER	(i)	304,292.	0.	0.	20,500.	17,259.	342,051.	0.	
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) LIZETTE LECLERC	(i)	219,178.	0.	0.	20,500.	7,628.	247,306.	0.	
DIRECTOR OF FINANCE AND OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) JENNIFER SOKOLOVE	(i)	207,931.	0.	0.	20,375.	16,979.	245,285.	0.	
DIRECTOR OF PROGRAMS & STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) NICOLE VERHOFF	(i)	206,810.	0.	0.	20,500.	11,441.	238,751.	0.	
DIRECTOR OF STRATEGIC PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) ANDREW FAHLUND	(i)	191,458.	0.	0.	9,795.	12,488.	213,741.	0.	
SENIOR PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ALEXANDRA PAXTON	(i)	160,463.	0.	0.	11,683.	8,930.	181,076.	0.	
PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) ELIZABETH SODERSTROM	(i)	155,322.	0.	0.	13,000.	10,506.	178,828.	0.	
STRATEGIC PARTNERSHIPS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WATER FOUNDATION

Employer identification number 37-1833985

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

WATER FOUNDATION STARTED A NEW PROGRAM SERVICE THE WATER SOLUTIONS FUND IN 2022.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

TRANSITIONING STRATEGIES: IN 2022, WATER FOUNDATION GRANTS ALSO HELPED

LAUNCH THE CALIFORNIA WATER DATA CONSORTIUM AND ESTABLISH AN EMERGING

FEDERAL POLICY PROGRAM THAT BUILDS THE POLITICAL WILL FOR PUBLIC

INVESTMENTS IN CLEAN DRINKING WATER, WATER INFRASTRUCTURE IMPROVEMENTS,

AND ESSENTIAL WATERSHEDS RESTORATION.

EXPENSES \$ 1,852,182. INCLUDING GRANTS OF \$ 629,888. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

THE AUDIT COMMITTEE REVIEWED AND APPROVED THE WATER FOUNDATION'S ANNUAL TAX

RETURNS BEFORE SUBMISSION TO THE IRS. ANY SIGNIFICANT FINDINGS HAVE BEEN

DISCUSSED WITH THE FULL BOARD. THE FULL BOARD RECEIVED A COPY OF THE

COMPLETED FORM 990 BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

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

1. ANNUAL DISTRIBUTION OF THE POLICY AND DISCLOSURES IS FURNISHED ANNUALLY

TO ALL INCUMBENT AND INCOMING DIRECTORS AND OFFICERS. EACH DIRECTOR AND

OFFICER SHALL ANNUALLY SIGN A STATEMENT THAT AFFIRMS THAT HE OR SHE HAS

RECEIVED A COPY OF THE POLICY; HAS READ AND UNDERSTANDS THE POLICY; AND HAS

AGREED TO COMPLY WITH THIS POLICY. EACH YEAR EACH DIRECTOR AND OFFICER

SHALL FILE A STATEMENT WITH THE BOARD OF DIRECTORS THAT LISTS: (1) ANY

OUTSIDE EMPLOYMENT OR CONSULTING WORK THAT COULD CONSTITUTE A CONFLICT; AND

232211 10-28-22

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization

WATER FOUNDATION

Employer identification number 37-1833985

- (2) ANY BOARD MEMBERSHIP OR AFFILIATION WITH OTHER ORGANIZATIONS THAT COULD CONSTITUTE A CONFLICT. EACH DIRECTOR AND OFFICER MUST ALSO LIST HIS OR HER INVESTMENTS IN ANY CORPORATION, PARTNERSHIP, TRUST OR FUND IN WHICH HE OR SHE, TOGETHER WITH MEMBERS OF HIS OR HER FAMILY, HAS DIRECTLY OR INDIRECTLY A GREATER THAN 35% OWNERSHIP INTEREST, REGARDLESS OF WHETHER SUCH INVESTMENTS COULD CONSTITUTE A CONFLICT.
- 2. DISCLOSURE OF ALL CONFLICTS AND POTENTIAL CONFLICT INCLUDING ALL

 MATERIAL FACTS CONCERNING ANY SITUATION THAT MIGHT BE VIEWED AS A CONFLICT

 SHALL BE DISCLOSED TO THE BOARD OF DIRECTORS BY THE DIRECTOR OR OFFICER

 CONCERNED.
- 3. PROCEDURES NECESSARY TO APPROVE ANY CONFLICT. NO DIRECTOR OF OFFICER MAY

 BE PRESENT FOR A VOTE BY THE BOARD OF DIRECTORS ON ANY DECISION OR ACTION

 BY WATER FOUNDATION FOR WHICH THE BOARD OF DIRECTORS HAS DETERMINED THAT

 THE DIRECTOR OF OFFICE HAS A FINANCIAL OR NON-FINANCIAL CONFLICT OF

 INTEREST.
- 4. ADDITIONAL PROCEDURES NECESSARY TO APPROVE A CONFLICT INVOLVING A

 MATERIAL FINANCIAL INTEREST. THE BOARD OF DIRECTORS SHALL NOT APPROVE ANY

 TRANSACTION TO WHICH THE WATER FOUNDATION WOULD BE A PARTY AND IN WHICH THE

 BOARD OF DIRECTORS HAS DETERMINED THAT A DIRECTOR OR OFFICER OF WF HAS A

 CONFLICT OF INTEREST INVOLVING A MATERIAL FINANCIAL INTEREST UNLESS AND

 UNTIL THE BOARD OF DIRECTORS HAS SPECIFICALLY AND IN GOOD FAITH DETERMINED

 AFTER REASONABLE INVESTIGATION THAT: (A) THE BOARD IS AWARE OF ALL MATERIAL

 FACTS CONCERNING THE TRANSACTION AND THE DIRECTOR OR OFFICER'S INTEREST IN

 THE TRANSACTION; (B) WF IS ENTERING INTO THE TRANSACTION FOR ITS OWN

 BENEFIT; (C) THE TRANSACTION IS FAIR AND REASONABLE AS TO WF AND (D) WF

 COULD NOT HAVE OBTAINED A MORE ADVANTAGEOUS ARRANGEMENT WITH REASONABLE

 EFFORT UNDER THE CIRCUMSTANCES.

Schedule O (Form 990) 2022 Page 2

Name of the organization Employer identification number

FORM 990, PART VI, SECTION B, LINE 15:

WATER FOUNDATION

THE SALARY OR OTHER COMPENSATION OF THE CEO [AND CHIEF FINANCIAL OFFICER]

OF THE CORPORATION AND THE MANNER AND TIME OF THE PAYMENT THEREOF SHALL BE

FIXED AND DETERMINED BY THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS

SHALL REVIEW THE COMPENSATION PACKAGES, INCLUDING ALL BENEFITS, OF THE CEO

[AND CHIEF FINANCIAL OFFICER] OF THE CORPORATION, AND SHALL APPROVE SUCH

COMPENSATION ONLY AFTER DETERMINING THAT THE COMPENSATION IS JUST AND

REASONABLE. THIS REVIEW AND APPROVAL SHALL OCCUR WHEN EACH SUCH OFFICER IS

HIRED, WHEN THE TERM OF EMPLOYMENT OF SUCH OFFICER IS RENEWED OR EXTENDED,

AND WHEN THE COMPENSATION OF SUCH OFFICE IS MODIFIED, UNLESS THE

MODIFICATION APPLIES TO SUBSTANTIALLY ALL OF THE EMPLOYEES OF THIS

CORPORATION.

DIRECTORS, OFFICERS, AND MEMBERS OF COMMITTEES SHALL NOT BE ENTITLED TO

COMPENSATION FOR THEIR SERVICES AS SUCH, ALTHOUGH THE BOARD OF DIRECTORS

MAY AUTHORIZE, BY RESOLUTION, THE ADVANCE OR REIMBURSEMENT TO A DIRECTOR OF

REASONABLE AND ACTUAL EXPENSES INCURRED AS A DIRECTOR, SUCH AS FOR

ATTENDING MEETINGS OF THE BOARD AND BOARD COMMITTEES.

FORM 990, PART VI, SECTION C, LINE 19:

ANY AUDITED FINANCIAL STATEMENTS OBTAINED BY THIS CORPORATION SHALL BE MADE

AVAILABLE FOR INSPECTION BY THE ATTORNEY GENERAL AND THE GENERAL PUBLIC

WITHIN NINE MONTHS AFTER THE CLOSE OF THE FISCAL YEAR TO WHICH THE

STATEMENTS RELATE, AND SHALL REMAIN AVAILABLE FOR THREE YEARS (1) BY MAKING

THEM AVAILABLE AT THIS CORPORATION'S PRINCIPAL, REGIONAL, AND DISTRICT

OFFICES DURING REGULAR BUSINESS HOURS AND (2) EITHER BY MAILING A COPY TO

ANY PERSON WHO SO REQUESTS IN PERSON OR IN WRITING OR BY POSTING THEM ON

THIS CORPORATION'S WEBSITE.

37-1833985

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** WATER FOUNDATION 37-1833985 FORM 990, PART IX, LINE 11G, OTHER FEES: PROFESSIONAL SERVICES AND CONTRACT FEES: 3,274,237. PROGRAM SERVICE EXPENSES 90,331. MANAGEMENT AND GENERAL EXPENSES 5,995. FUNDRAISING EXPENSES 3,370,563. TOTAL EXPENSES TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 3,370,563.