Form

Return of Organization Exempt From Income Tax Under section 501(c), 627, or 4947(e)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at wave its government.

OMB No. 1545-0047 2014 Open to Public

	eriment of the Trees		<u>L</u>			mbers on this form as			·	Open to Public Inspection
Ā	For the 2014	calendar	year, or tax y	ear beginning		, and ending				
В	Check if applicable.	C Name	of organization						D Employer	Identification number
П	Address change	l		Charity G	Slobal Inc	•				
Ħ	Name change		butiness as	charity:					1 22-3:	936753
H				box if mail is not delive	ered to street address)	-		Room/suite	E Telephone	number
닏	Initial return Final return/		Worth St	reet ince, country, and ZIP or	r facility partal and			330	646-	<u> 688-2323</u>
Ш	terminated	I	_	utos, courtuy, and 21P o						
П	Amended return		York and address of pri	abal albana	<u>NY 100</u>	13			G Gross rec	ipis\$ 60,043,370
Ħ	Application pending	1 -		•				H(a) Isthesage	num estum for e	ubordinates? Yes X No
	Application partiting		ott Har						,	<b>5. 5.</b>
		1		Street Su				H(b) Ane all su		
			York		NY ]	.0013		If "No.	" attach a list	(see Instructions)
<u></u>	Tex-exempt status		501(c)(3)		(insert no )	4947(a)(1) or 5	527			
<u>J</u>				ater.org	<del></del>			H(c) Group exa		<u> </u>
K	Form of organization			ust Association	Other -		L Yea	r of formation: 2	006	M State of legal domicile: NY
<u> </u>		umman			<u> </u>					
			•	's mission or mos	t significant activ	lties:				
8	See	Sched	iite o							
ğ					-					
Governance			<b></b>							
ලි	2 Check to					or disposed of mon	e than 25%	of its net as	sets.	_
-5	1	•		e governing body	•				. 3	8
Activities				nembers of the go	• • •	•			. 4	7
₹	1			loyed in calendar	•	/, line 2a)			. 5	_91
Ac				mate_if necessary			-		6	550
				e from Part VIII o		2			7a	0
	b Net unre	elated, bus	iness taxable	ncome from Form	1990-T, line 34				7b	0
	& Contribu	tions and	grants Part	ine th	<b>=</b>		<b>⊢</b>	Prior Yes 36,260		Current Year
욬		1,	<b>7. 1.</b>	· .				30,20	0,866	43,690,259
Revenue			evenue (Part	lumn (A) lines 3,		• ••		20	9,866	400 072
8				(A), lines 5, 6d, 8		10)	· F		7,589	400,072 -399,248
			and the same of th	ugh 11 (must equa			<b>-</b>	36,413		43,691,083
_	1			(Part IX, column		ii) (//), iii)e 12)		26,554		30,344,984
			-	(Part IX, column (	• • •	•			0	00,344,304
_		•		nployee benefits (		A) lines 5_10)	<b> </b>	5 09	5,985	5,825,431
Expenses				art IX, column (A),		, ,,	• –	0,00	0	0,020,431
			-	IX, column (D), lii	•	3,769,846	·	<del></del>	<del></del>	<del> </del>
ă		•	•	n (A), lines 11a-11		, , , , , , , , , , , , , , , , , ,	-	2 75'	7,615	3,857,059
	ľ			(must equal Part	• -•	 ine 25)	·	34,409		40,027,474
				t line 18 from line			<b>—</b>		3,722	3,663,609
58	1 170 ACLING	- 1000 CVD		IO HOIT MIC			·····	Beginning of Cur		End of Year
Assets or Balances	20 Total ass	sets (Part	X, line 16)					43,05		55,596,890
<b>₩</b>	21 Total liat		rt X, line 26)		•	••		18,129		26,649,816
差	4	ets or fund	l balances. Su	btract line 21 from	line 20	• • • • • • • • • • • • • • • • • • • •		24,927		28,947,074
P	art II Si	ignature	Block							
Ur	nder penalties of	perjury, I d	leclare that I have	e examined this retu	inn, including accor	npanying schedules and	d statements	, and to the be	est of my kno	wledge and belief, it is
tru	ie, correct, and c	complete. D	eclaration of pro-	parer (other than of	ficer) is based on a	Il Information of which	preparer has	any knowledg	е.	1 /
	1 .					<del></del>				1/16/2015
Sig	ın 📗 🤊	Signature of	officer						Date	
Hei		Mich		bley		v	ice P	residen	t of	Finance
	<del></del>		name and title	/ /						
	.   ''	o buebauen, e			Preparer's signatur	dem du		Date	Check	if PTIN
Paic		71n L.	Duncan		<u> </u>	der.		11/16/	15 self-empl	oyed P01249521
•	Parer Firm's na	ame 🕨	KPMG LLF	•					m's EIN	13-5565207
use	Only		345 PARK							(010) 750 0700
<del></del>	Firm's ac			, NY 10154				<u></u>	hane no	(212)758-9700
				eparer shown abo	<u>-</u>	ons)		<u> </u>		X Yes No
For I	raperwork Red	uction Act	Notice, see th	e separate instructi	ious.			<b>(</b> \	,	Form <b>990</b> (2014)

m 990 (2014) Charity Global Inc.	22-3936753	Page 2
Part III Statement of Program Service Accomplishme Check if Schedule O contains a response or note		X
Bnefly describe the organization's mission:	to dry mio in tho ratem	<u> </u>
See Schedule O	,	
··· · · · · · · · · · · · · · · · · ·		• •
Did the organization undertake any significant program services during t	the year which were not listed on the	
prior Form 990 or 990-EZ?		Yes X No
If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in it	now it conducts any amorana	
services?	low it conducts, any program	Yes X No
If "Yes," describe these changes on Schedule O.	• • • • • • • • • • • • • • • • • • • •	
Describe the organization's program service accomplishments for each expenses Section 501(c)(3) and 501(c)(4) organizations are required to the total expenses, and revenue, if any, for each program service report	report the amount of grants and allocations to other	
Ethiopia is ranked 173 out of 187 on 42% of the population having access improved sanitation. Most Ethiopians such as rivers, ponds, and unprotect water resources, increasing the risk of death in these communities. In 20 projects in Ethiopia's communities, people.	to improved water and just obtain water from unproved springs. Animals tend of disease, which is the la, charity: water funder	st 23% to tected sources to share these e leading cause d 1,177 water
e e e e e e e e e e e e e e e e e e e		
***		
Malawi, a small landlocked country in 17.96 million people, ranked 174 out Development Index. 85% of the popular with limited access to improved water Malawians lack access to an improved improved sanitation. As a result, wardysentery, cholera, and typhoid) are by the rapid spread of HIV/AIDS, as prevalence rate in the world. In 201 projects that can serve 114,406 peop	of 187 on the most receition lives outside the transfer and sanitation: 16.8% water source and 92% lacter-related diseases (in a common problem and are Malawi has the ninth high 4, charity: water funded	population of nt Human wo major cities of rural ck access to cluding exacerbated hest HIV/AIDS
In Nepal, over 25% of the population	rants of \$ 2,017,199 ) (Revenue lives below the poverty	line.
contributing to its rank of 145 out all though almost 88% of the rural populations of the rural disasters. Nepal's geographic and natural disasters such as earthquickes to the most remote areas. In projects that can serve 53,277 people of the rural disasters of the rural populations	ulation has access to an improved sanitation. Many water supply is often in phy is extremely mountain ities in water project in uakes, flooding, and land 2014, charity: water fund	improved water water systems termittent or hous, which mplementation, dslides impede
Other program services (Describe in Schedule O.)  (Expenses \$ 15,475,712 including grants of \$ 12  Total program service expenses ▶ 33,014,896	,870,727 ) (Revenue \$	)

	IL IA Olleckier of Izednien ochennies			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			1
	complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	İ		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	ļ		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	ł		
	Part III	5		X
· 6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		,	
	"Yes," complete Schedule D, Part I	6	1	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	广	$\vdash$	
•	complete Schedule D. Part III	8		X
	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
9	·			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	9	ļ	x
	debt negotiation services? If "Yes," complete Schedule D, Part IV	-	┝	-
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	47.63 1	<b>X</b>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	30		1. A.
	VII, VIII, IX, or X as applicable.	1		' ت '
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	١		•
	complete Schedule D, Part VI	11a	X	<b>_</b>
b			1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<u> </u>	X
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		_
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	ļ	X
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l	l	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		Ī	l
	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on	· · · ·		<u> </u>
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		ж
4 R	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<b>—</b>		
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	ĺ
46		- '0		<del></del>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		7
20-	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		<del></del>
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	- 001	(2014)
		For	m ラブ	r (2014)

	artiv Checklist of Required Schedules (Collulated)				<i>_</i>	
	·			_	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			۱.,	ľ	75
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	•		21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			1		•
	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			1		
	employees? If "Yes," complete Schedule J			23_	X	_
24a				-		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				ĺ	_
	through 24d and complete Schedule K If "No," go to line 25a			248	ļ	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24b		
C	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		
þ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			}		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		X
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			ı	ŀ	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			1		
	If "Yes," complete Schedule L, Part I			25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any					
	current or former officers, directors, trustees, key employees, highest compensated employees, or					
	disqualified persons? If "Yes," complete Schedule L. Part II		_	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		-			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled					
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III			27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		•		,	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	•	•			
	Schedule L, Part IV			28b	X	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	•				
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			28c		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 Schedule N, Part II			32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		•			
	sections 301,7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I			33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	•	•	1		
•	or IV, and Part V, line 1			34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		• •	35a		X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	• • •		1000		
_	controlled entity 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-chantable		•••	100		
55	related organization? If "Yes," complete Schedule R, Part V, line 2			36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	•		36		<u></u>
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,					
	Part VI			27		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		•	37		<u> </u>
38	19? Note. All Form 990 filers are required to complete Schedule O			,,	x	
	137 Note: All Forth 330 liets die required to complete Scriedule O		<del> </del>	38	000	

Fom	n 990 (2014) Charity Global Inc. 22-3936753		F	age 5
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part V			┵
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 51			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		[	}
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1.	۱	1
_	reportable gaming (gambling) winnings to prize winners?	. <u>1c</u>	X	<b>├</b>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ĺ	`	
_	Statements, filed for the calendar year ending with or within the year covered by this return  2a 91		<del>-</del>	
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	. <u>2b</u>	X	├—
2-	Did the organization have unrelated business gross income of \$1,000 or more during the year?			x
3a h	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a	<del> </del>	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b	<del>                                      </del>	┢──
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			i
	account)?	4a		x
ь	If "Yes," enter the name of the foreign country.	. 40	<del></del>	<del>                                     </del>
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	^-	٠.	
	(FBAR).	į	1	1
Бa	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, dld the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	,		
	organization solicit any contributions that were not tax deductible as chantable 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	l	
7	Organizations that may receive deductible contributions under section 170(c).		٠,٠	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1		
	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	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			l
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>	-	·
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7⊕	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	├—	Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. <u>7g</u>	-	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	. 7h	1	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		٠,	
	sponsoring organization have excess business holdings at any time during the year?	8		<del></del>
7	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	ا م	, I	
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b	<b>-</b>	<b></b> -
10	Section 501(c)(7) organizations. Enter:	30	<b>├</b> .─	
a	Initiation fees and capital contributions included on Part VIII, line 12	1.		ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			1
11	Section 501(c)(12) organizations. Enter.	<del> </del> ;	3.	1
а	Gross Income from members or shareholders	,* 17,		l
b	Gross income from other sources (Do not net amounts due or paid to other sources	241	•	1
	against amounts due or received from them.)	7.0	or .	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		_	
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		Ţ.	
ь	Enter the amount of reserves the organization is required to maintain by the states in which	-1	'	
	the organization is licensed to issue qualified health plans		.	4 -
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
DAA		Fon	m 990	(2014)

Fom	990 (2014) Charity Global Inc. 22-	-3936753				P	age 6
Pa	Int VI Governance, Management, and Disclosure For each "Yes" response	nse to lines 2 through	h 7b	below, and	for a		
	response to line 8a, 8b, or 10b below, describe the circumstances, proce	esses, or changes in	Sch	edule O. Se	e inst	ructioi	ns.
	Check if Schedule O contains a response or note to any line in this Part						X
Sec	tion A. Governing Body and Management						
	•					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		1a	8	_	[	
	If there are material differences in voting rights among members of the governing body, or					١.	
	If the governing body delegated broad authority to an executive committee or similar		ļ				
	committee, explain in Schedule O						1
b	Enter the number of voting members included in line 1a, above, who are independent		1b	_7		-	
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	elationship with					
	any other officer, director, trustee, or key employee?				2	X	
3	Did the organization delegate control over management duties customarily performed by or						
	supervision of officers, directors, or trustees, or key employees to a management company of	or other person?			3_		X
4	Did the organization make any significant changes to its governing documents since the prior	r Form 990 was filed?		•	4		X
5	Did the organization become aware during the year of a significant diversion of the organization	tion's assets?		_	_5		X
6	Did the organization have members or stockholders?		•		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to el	lect or appoint		,			
	one or more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) me	mbers,	·				
	stockholders, or persons other than the governing body?				7b_		X
8	Did the organization contemporaneously document the meetings held or written actions under	ertak <b>e</b> n during the yea	гbyth	e following:			
а	The governing body?		-	•	8a	X	
b	Each committee with authority to act on behalf of the governing body?		•	•	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be set of the control of th	ot be reached at		••			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule	<u> </u>			9		X
Sec	tion B. Policies (This Section B requests information about policies not req	uired by the Inter-	nal R	evenue Co	de.)		
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		X
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 exer	mpt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its govern	ning body before filing	the fo	m?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	D.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interes	sts that could give rise	to co	nflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the police	cy? If "Yes,"					
	describe in Schedule O how this was done				12c	X	
13	Did the organization have a written whistleblower policy?				13	X	
14	Did the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and	approval by				7	
	independent persons, comparability data, and contemporaneous substantiation of the delibe				.	.	
а	The organization's CEO, Executive Director, or top management official				15a	X	
b	Other officers or key employees of the organization	1		'	15b	X	
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	'	•	'	3.	,	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	arrangement				·	
	with a taxable entity during the year?	•			16a	l	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to	evaluate its	•••	•		1	
	participation in joint venture arrangements under applicable federal tax law, and take steps to	safeguard the				<i>'</i>	
	organization's exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure			<u> </u>			_
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR,	AZ,CA,CO,CT,D	C,FL	,GA,HI,	L,KS		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a					•	
	available for public inspection, indicate how you made these available. Check all that apply	, =====	. ,,.	,,			
	Own website Another's website X Upon request Other (explain in Scho	edule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing docum		st polic	v. and			
-	financial statements available to the public during the tax year.	,		,, <del>.</del>			
20	State the name, address, and telephone number of the person who possesses the organizat	ion's books and recom	is: Þ				
	chael Gumbley c/o charity:water 40 Worth Street, Su						
	w York	NY 1001:	3	646	-688	3-23	323
							==

Form 990 (201	14) Charity Global Inc.	22-3936753	Page 7
Part VII	Compensation of Officers, Directors, Ti	rustees, Key Employees, Highest Compensated Emplo	
•	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, a	nd Highest Compensated Employees	
1a Complete t	this table for all persons required to be listed Report of	compensation for the calendar year ending with or within the	

- organization's tax year

   List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
  List persons in the following order: individual trustees or directors: institutional trustees; officers; key employees; highest compensated employees, and former such persons.

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	more t rson is director	han one both an Mustee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted (Ine)	Individual trustee or director	Institutional trustee	Officer	Кеу етрюуев	Former Highest compensated employee	organization (W-2/1089-MISC)	(W-2/1099-MISC)	from the organization end related organizations	
(1) Scott Harrison										
Founder/CEO	50.00	x		x		- 1	220,921	o	14,298	
(2) Michael Wilkers		+==	╅		$\vdash$	<del></del>	220,321		14,230	
(2)1	2.00					- 1				
Chairman	0.00	X		x			o	o	0	
(3) Gian-Carlo Ocho		†				$\dashv$				
• •	2.00		1							
Treasurer	0.00	X		x			o	o	0	
(4) Brook Hazelton									<u>_</u>	
•	2.00			١.						
Secretary	0.00	X		x			o	o	0	
(5) Chi-Hua Chien										
	2.00	F				ı				
Board Member	0.00	X					0		0	
(6) Brant Cryder										
	2.00				ŀ					
Board Member	0.00	X					0	0	0	
(7) Valerie Donati										
	2.00				1	1				
Board Member	0.00	X					0	0	0	
(8) Shannon Sedgwick						-				
·	2.00							_		
Board Member	0.00	X			_		0	0	0	
(9) Christoph Gorden		l				1				
	50.00							_i		
Chief Water Officer	0.00	<b>├</b> ─		X	_		249,429	0	30,508	
(10) Michael Letta	F0 00				-					
	50.00						440 045	_		
CFO Total	0.00	$\vdash$	Н	X	-		148,241	0	11,479	
(11) Lauren Letta	E0 00							1		
Chief of Staff	50.00					x I	120 001	0	0 500	
CITTEL OF STREET	<u> </u>	4					120,881	<u> </u>	9,700 Form 990 (2014)	

Part VII Section A. Officers	, Directors, Tri	ıstee	s, K	ey E	mp	oyee	75, a	ind Highest Compensated	Employees (continued)	
(A) Name and title	(B) Average hours per week (list any	bo	ix, unit	Pos check ess pe	rson i	than d is both or/trust	an	(D) Reportable compensation from the	(E)  Reportable  compensation from  related  organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	or director	Institutional frustee	Officer	Кеу етріоуев	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization end related organizations
(12) William Bell	50.00									
Controller	0.00					X		115,292	o	5,479
(13) Jaclyn Lindsey	F0 00									
Director of Dev.	50.00					x		109,383	o	15,690
(14) Deepa Subramania	m	1-		<u> </u>						
Director of Product	50.00 0.00	1				x		109,274	o	7,865
(15) Paull Young	0.00	十					<u> </u>	103,272		7,803
	50.00							100 055		
Director of Digital (16)	0.00	$\vdash$				X		108,055	0	10,052
	•								;	
(17)						:				· · · · · · · · · · · · · · · · · · ·
(18)					-					
(19)		1		-						<del>-</del>
1b Sub-total	•						<b>&gt;</b>	1,181,476		105,071
c Total from continuation shee d Total (add lines 1b and 1c)	ets to Part VII,	Secti	ion /	4			<b>&gt;</b>	1,181,476		105,071
Total number of Individuals (In reportable compensation from					e list	ed a	bove	<del></del>	\$100,000 of	103,011
3 Did the organization list any fo					ee l	ev e	emol	ovee or highest compensa	ited	Yes No
employee on line 1a? If "Yes,"	complete Sche	dule	J for	suci	h inc	lividu	ıal .			3 **
4 For any individual listed on line organization and related organ										
individual  5 Did any person listed on line 1	a receive or ac	crue	com	pens	atior	fron	n an	ny unrelated organization or	ındıvidual	4 X
for services rendered to the or		es,	com	plete	Sch	nedul	e J	for such person	·····	5 X
1 Complete this table for your five	e highest comp									
compensation from the organiz	zation. Report of (A) business address	ompe	nsat	ion fi	or th	e ca	lend		in the organization's tax ye (B) ion of services	ar. (C) Compensation
Gelman, Rosenberg, &					155	0 1	fon	tgomery Avenue	ion of services	Completisation
Bethesda	MC		08	14			_ <u>c</u>	Consultant		137,982
Titus Consulting LLC Plymouth Meeting		1	94		309	Ar		ony Drive Consultant		110,000
Total number of independent or received more than \$100,000	contractors (included compensation	iding	but n the	not li	imite anizi	d to	thos	se listed above) who	2	
					_					

,	Check if Schedule	U cont	ains a	response o		in this Part VIII	<del></del>	<u>.                                    </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
學 1a	Federated campaigns	1a		71,472		,		
=	Membership dues	1b						
<b>₹</b> °	Fundraising events	1c	1,	559,957				
ie d	Related organizations	1d	·					}
Ē e	Government grants (contributions)	1e						İ
<u>2</u> 1	All other contributions, girls, grants,					5 ( A)		
	and similar amounts not included above	11		058,830				;
D 8	Noncash contributions included in lines 1a	-1f. \$	3,	307,981		_		1. 2
<u> </u>	Total. Add lines 1a-1f			▶	43,690,259	,		<u> </u>
2				Busn. Code		. ***		-
2a	ı							
b						·		
[								
d								
6 1	•							
1	All other program service reve	enue						<u> </u>
<u> </u> 9	Total. Add lines 2a-2f			▶	<del></del>			
3	Investment income (including	dividen	ds, intere	est,				
1	and other similar amounts)			▶	399,207		ļ	399,207
4	Income from investment of tax	x-exemp	ot bond p	proceeds			<del> </del>	
5	Royalties	<del>''</del>		<u> </u>		<u> </u>	<u> </u>	
	(i) Real		(ii)	Personal				
6a	Gross rents					-		1
b	Less rental exps							
c	Rental inc. or (loss)							
_d	Core amount from	<del></del>	·					
'"	sales of assets (i) Securities		(0)	) Other	· <u>.</u> .	,		
1	other than inventory 15,928,	859						, , ,
þ						<i>√ 3</i>		1,000
	basis & sales exps. 15,927,					* .		1 1 1 1
C	, , ,	865			0.55	;		'
ď	Net gain or (loss)	٠.٠	<del></del>		865			865
8a	Gross income from fundraising even					***		
	(not including \$ 1,559,					1.7		1
	of contributions reported on line 10	i).		İ				1 Jan 2 6
_	See Part IV, line 18	a _						1
Ь	•	ьL		424,293				
c	• •		events		-424,293	• • • • • • • • • • • • • • • • • • • •	<b></b>	-424,293
9a	Gross income from gaming activities			i		2.1		
	See Part IV, line 19	a					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Te store
þ	Less: direct expenses	ÞĹ			- 3	**		1
C	Net income or (loss) from gan	- г	rvities					
10a	Gross sales of inventory, less				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, <u>, , , , , , , , , , , , , , , , , , </u>		<b>D</b>
İ	returns and allowances	a				· · · · · · · · · · · · · · · · · · ·		: -
P	•	ьГ						ļ. <del></del> .
<u>c</u>		s of inv	entory	<u> </u>	_			
<u> </u>	Miscellaneous Revenue			Busn. Code	05 045			1
11a	Miscellaneous Income				25,045			25,045
b				$\vdash$			<del> </del>	<del></del>
C				-		<del></del>	<del> </del>	<del> </del>
d	All other revenue				05.045		<del> </del>	
е	Total. Add lines 11a-11d			•	25,045		<del> </del>	
12	Total revenue. See instruction	ns		▶	43,691,083		0	824

DAA

Form **990** (2014)

	990 (2014) Charity Global : rt IX Statement of Functional Ex		22-39	36753	Page 10
	on 501(c)(3) and 501(c)(4) organizations must o		ther organizations must co	implete column (A)	
Secu	Check if Schedule O contains a resp			implete Column (A)	
Do n	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Menagement and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		asportion _	Review exhermes	ифинасо
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	individuals See Part IV. line 22			i	
_		<del></del>			
3	Grants and other assistance to foreign			-	
	organizations, foreign governments, and foreign	30,344,984	30,344,984		
	Individuals. See Part IV, lines 15 and 16	30,344,364	30,344,364	<u>-</u>	
4	Benefits paid to or for members		· · · · · · · · · · · · · · · · · · ·		<del></del>
5	Compensation of current officers, directors,	CT0 100	005 105	000 044	100 001
	trustees, and key employees	679,180	205,135	280,244	193,801
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	236,794		120,978	115,816
7	Other salaries and wages	4,015,819	664,597	1,368,713	1,982,509
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	90,156	18,444	24,538	47,174
9	Other employee benefits	348,370	64,296	108,865	175,209
10	Payroll taxes	455,112	80,492	151,437	223,183
11	Fees for services (non-employees):				
а	Management				
	Legal				
	Accounting	199,232	137,982	61,250	
d	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees	70,422		70,422	
_	<u>-</u>	10,322	<b></b> .	70,422	***
9	Other. (If line 11g amount exceeds 10% of line 25, column	792,113	303,532	389,979	98,602
	(A) amount, list line 11g expenses on Schedule O.)	192,113	303,532	309,313	30,002
12	Advertising and promotion	600 363	E0 140	00 306	440 000
13	Office expenses	600,363	59,148	92,326	448,889
14	Information technology	-			
15	Royalties				45 445
16	Occupancy	134,498	26,788	41,815	65,895
17	Travel	587,676	218,627	185,441	183,608
18	Payments of travel or entertainment expenses	,			
	for any federal, state, or local public officials		· · · · · · · · · · · · · · · · · · ·		,
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	161,515	32,169	50,214	79,132
23	Insurance	109,292	21,768	33,978	53,546
	Other expenses Itemize expenses not covered		,		
	above (List miscellaneous expenses in line 24e. If	s, s,	7		***
	line 24e amount exceeds 10% of line 25, column	,		-,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(A) amount, list line 24e expenses on Schedule O.)	100 100	1 25.5	ta -per	
_	• •	639,139	639,139		<u></u>
a	Remote Monitoring	262,532	039,139	262,532	
b	Bank Charges	197,795	197,795	202,332	
C	Repairs of water projects		191,195	<del></del>	70 400
d	Event Costs	78,482	-	· · · · · · · · · · · · · · · · · · ·	78,482
	All other expenses	24,000	22 24 22 2	0.046.555	24,000
25	Total functional expenses. Add lines 1 through 24e	40,027,474	33,014,896	3,242,732	3,769,846
	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)				

art )	Check if Schedule O contains a response or note	to any line in this Part X			····
	The state of the s		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		2,989	1	2,36
2	Savings and temporary cash investments	23,154,099	2	12,559,78	
3	Pledges and grants receivable, net	•	9,193,570	3	16,039,93
4	Accounts receivable, net	•		4	
5	Loans and other receivables from current and former off	ficers, directors,	2 K.		
	trustees, key employees, and highest compensated emp				
İ	Complete Part II of Schedule L		5		
6	Loans and other receivables from other disqualified pers	ons (as defined under section	73		
İ	4958(f)(1)), persons described in section 4958(c)(3)(B),	and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntary	employees' beneficiary		ř.	
	organizations (see instructions) Complete Part II of Schi	edule L		6	Í
7	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		240,819	9	676,050
10a	Land, buildings, and equipment: cost or				
ļ	other basis Complete Part VI of Schedule D	10a 1,483,066			' '
ь	Less: accumulated depredation	10b 418,446	535,492	10c	1,064,620
11	investments—publicly traded securities		9,799,548	11	25,121,169
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets. See Part IV, line 11		130,954	15	132,960
16	Total assets. Add lines 1 through 15 (must equal line 34	)	43,057,471	16	55,596,890
17	Accounts payable and accrued expenses		780,134	17	1,168,905
18	Grants payable		17,349,485	18	25,480,911
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete Part IV of	Schedule D		21	
22	Loans and other payables to current and former officers,	directors,			<b>l</b>
ļ	trustees, key employees, highest compensated employe	es, and	. , .		
	disqualified persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated third	parties .		23	
24	Unsecured notes and loans payable to unrelated third pa	arties		24	
25	Other liabilities (including federal income tax, payables to	related third			
	parties, and other liabilities not included on lines 17-24).	Complete Part X			
	of Schedule D			25	
26	Total liabilities, Add lines 17 through 25		18,129,619	<u> 26</u>	26,649,816
İ	Organizations that follow SFAS 117 (ASC 958), check	there ▶ 🗶 and		÷.	, ,
ł	complete lines 27 through 29, and lines 33 and 34.			-	
27	Unrestricted net assets		11,056,262	27	11,659,675
28	Temporarily restricted net assets	••	13,871,590	28	17,287,399
29	·	·		29	<u> </u>
ł	Organizations that do not follow SFAS 117 (ASC 958)	, check here ▶ ∐ and	2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		J. 25
1	complete lines 30 through 34.	-			31/2
30	Capital stock or trust principal, or current funds			30	
31	Paid-in or capital surplus, or land, building, or equipment			31	
32	Retained earnings, endowment, accumulated income, or	other funds	04 005 055	32	<b>A A A A A A A B A B B A B B B B B B B B B B</b>
33	Total net assets or fund balances		24,927,852	33	28,947,074
34	Total liabilities and net assets/fund balances		43,057,471	34	55,596,890

Form	990 (2014) Charity Global Inc. 22-3936753			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	43,6	91,	083
2	Total expenses (must equal Part IX, column (A), line 25)	2	40,0	27,	474
3	Revenue less expenses. Subtract line 2 from line 1	3	3,6	63,	<u>609</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24,92		
5	Net unrealized gains (losses) on investments	5	-2.	58,	124
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior penod adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	6:	13,	737
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	28,94	17,0	074
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				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 in			•	
	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		٦.		
	Separate basis Consolidated basis Both consolidated and separate basis		"	٠.	
ь	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		٠.	,,	
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compliation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				,
	Schedule O				ĺ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				ĺ
	the Single Audit Act and OMB Circular A-133?		3а		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Fon	<sub>n</sub> 990	(2014)

## SCHEDULE A

(Form 990 or 990-EZ)

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name	of the organization	Charity Glob	al Inc.			Employer idea 22-393	Mication number			
P	art I Reas		Status (All organizations	must c	omplete					
_			e it is: (For lines 1 through 11,							
1	<del></del>	•	sociation of churches described			•				
2	<del></del>	scribed in section 170(b)(1)(			• •					
3	A hospital or	a cooperative hospital servi	ce organization described in se	ection 17	D(b)(1)(A)	(III).				
4	A medical re	search organization operated	d in conjunction with a hospital	described	in section	on 170(b)(1)(A)(iii). Enter the	hospital's name,			
	city, and stat	te: .								
5	An organizat	tion operated for the benefit of	of a college or university owned	l or operat	ed by a g	governmental unit described in	, , , , ,			
	section 170	0(b)(1)(A)(iv). (Complete Part	: II )							
6			povernmental unit described in			•••				
7										
_		section 170(b)(1)(A)(vi). (C								
8	<b>—</b>		170(b)(1)(A)(vi). (Complete Pai	·-						
9	_	<del>-</del>	1) more than 33 1/3% of its supert functions, subject to contain	-						
	•		npt functions—subject to certain nd unrelated business taxable i	•	•	•	i			
		· •	0, 1975 See section 509(a)(2			•				
10			exclusively to test for public sai	•		•				
11	H		exclusively for the benefit of, to	•			oses of			
						•				
	one or more publicity supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.									
a	a 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 I	V, Sections A and B.							
þ		•	rised or controlled in connection		• •	• • • •				
		•	organization vested in the sam	e persons	that con	trol or manage the supported				
_	` `	s) You must complete Par								
C			orting organization operated in							
d		•	tions). You must complete Pa supporting organization operate	-		•	١			
ŭ			ganization generally must satisf				,			
			t complete Part IV, Sections		•					
•			d a written determination from t							
	functionally Ir	ntegrated, or Type III non-fu	nctionally integrated supporting	organizat	ion.					
f	Enter the numbe	r of supported organizations		-						
_9_	Provide the follow	wng information about the s	upported organization(s).							
(	) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9	1 2 7 .	organization ur governing	(V) Amount of monetary	(vi) Amount of			
	Organization		above or IRC section		ment?	support (see instructions)	other support (see instructions)			
			(see instructions))	Yes	No					
(A)				1			<del> </del>			
(B)										
-				1						
(C)										
(D)				1	<del> </del> -					
					ļ					
(E)										
—		, - , - ,		+ -	`. "		<del>                                     </del>			

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

800	tion A. Public Support			listed below, p			
	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and	(a) 2010	(B) 2011	(6) 2012	(a) 2013	( <del>0</del> ) 2014	(f) Total
	membership fees received. (Do not include any "unusual grants.")	16,045,516	27,062,961	32,979,756	36,260,866	43,690,259	156,039,358
2	Tax revenues levied for the organization'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	16,045,516	27,062,961	32,979,756	36,260,866	43,690,259	156,039,358
6	The portion of total contributions by			•			
	each person (other than a governmental unit or publicly		, ,		<i>[</i> , , ]		
	supported organization) included on		*4			Ì	
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)			·			19,068,665
Sec	Public support Subtract line 5 from line 4.  tion B. Total Support	<u> </u>					136,970,693
	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	16,045,516	27,062,961	32,979,756	36,260,866	43,690,259	156,039,358
8	Gross income from interest, dividends,	0.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
•	payments received on securities loans,					1	
	rents, royalties and income from similar sources	3,959	8,798	38,910	218,600	399,207	669,474
_							
9	Net income from unrelated business activities, whether or not the business						
	Is regularly carried on						
40							
10	Other income. Do not include gain or loss from the sale of capital assets	ľ			i		
	(Explain in Part VI.)	28,022	31,040	24,050	428,982	25,045	537,139
11	Total support. Add lines 7 through 10						157,245,971
12	Gross receipts from related activities, etc.	(see instructions)	_			12	617,585
13	First five years. If the Form 990 is for the	organization's first,	second, third, fou	rth, or fifth tax yea		(c)(3)	
	organization, check this box and stop her	e <u> </u>	<u> </u>				
Sec	tion C. Computation of Public Si	upport Percent	age				
14	Public support percentage for 2014 (line 6	, column (f) divided	by fine 11, column	1 (f))		14	87.11 %
15	Public support percentage from 2013 Scho	edule A, Part II, line	14			15	87.85 %
18a	33 1/3% support test-2014. If the organ	ization did not chec	k the box on line 1	3, and line 14 is 3	13 1/3% or more, c	heck this	
	box and stop here. The organization qual	ifies as a publicly s	upported organiza	ion			<b>▶</b> 🗓
b	33 1/3% support test-2013. If the organ	ization did not checl	k a box on line 13	or 16a, and line 1	5 is 33 1/3% or mo	ore,	_
	check this box and stop here. The organi	zation qualifies as a	a publicly supporte	d organization	•		. ▶ 📑
17a	10%-facts-and-circumstances test-201	_					
	10% or more, and if the organization mee	ts the "facts-and-cire	cumstances" test,	check this box and	d <b>stop here</b> . Expla	in in	
	Part VI how the organization meets the "f	acts-and-circumstan	ces" test. The org	anization qualifies	as a publicly supp	orted	<b></b>
	organization .						. ▶∐
b	10%-facts-and-circumstances test—201	-			•	d line	
	15 is 10% or more, and if the organization			•	•		
	Explain in Part VI how the organization m	eets the "facts-and-	circumstances" tes	it The organization	n qualifies as a pu	blicty	. —
	supported organization		•	•		••	▶ [_]
18	Private foundation. If the organization did	I not check a box of	n kne 13, 16a, 16b	), 17a, or 17b, che	ck this box and se	e	, —
	Instructions						▶ ∐

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

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

If the organization fails to qualify under the tests listed below, please complete Part II)

<u>Sec</u>	tion A. Public Support					·	
	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	(a) 2010	(5) 2011	(0) 2012	(u) 2013	(e) 2014	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from 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		ļ			, , , , , , , , , , , , , , , , , , , ,	
8	Public support (Subtract line 7c from line 6.)	_	·- ·	- ,-			
Sac	tion B. Total Support	<u> </u>		_		<u> </u>	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	(2) ==	(-)	(6, 25,2	(3) 2010	(6) 20.4	(17 1012)
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						<u> </u>
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		-				
11	Net income from unrelated business activities not included in 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.)	L	<u>L</u> .			<u> </u>	
14	First five years. If the Form 990 is for the organization, check this box and stop her	•	st, second, third, fo	urth, or fifth tax yea	ar as a section 50	1(c)(3)	
Sec	tion C. Computation of Public Su	upport Percen	tage				
15	Public support percentage for 2014 (line 8,	• • •	•	un (f))		15	%
16	Public support percentage from 2013 Sche			· · · · · · · · · · · · · · · · · · ·		16	%
	tion D. Computation of Investme						
17	Investment income percentage for 2014 (li	•	•	3, column (f))		17	%_
18	Investment income percentage from 2013						%_
19a	33 1/3% support tests—2014. If the orga						, 🗀
	17 is not more than 33 1/3%, check this bo	•	-		• •	•	▶ [_]
b	33 1/3% support tests—2013. If the organize 18 is not more than 33 1/3%, check the					•	⊾ □
20	Private foundation. If the organization did						IH.
	THE TOURS OF THE PROPERTY OF T	THU CHECK & DUX	VI III 17, 130, U	TOD, GREGA BIIS DO	A BIRD SEE BISHING	10119	

determine whether the organization had excess business holdings )

## Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Soct	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complion A. All Supporting Organizations	ete Part V.)	)	
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
1	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		162	NO
	class or purpose, describe the designation. If historic and continuing relationship, explain.	١.	ł	
2	• • • •	1		<del> </del>
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	ا ا		· ·
2-	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	<u>3a</u>		<del> </del> -
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	ì		,
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
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.	3c		<u> </u>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	Į.		
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		<u> </u>
ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign		٠, ذ	١.
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion		,, c	<u>'</u>
	despite being controlled or supervised by or in connection with its supported organizations	4b		ļ
C	Did the organization support any foreign supported organization that does not have an IRS determination	ا م	_	
	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	,		
	answer (b) and (c) 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).	5a		
ь	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?	5b	-	
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<u> </u>
-6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			<u> </u>
•	anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class		***	
	benefited by one or more of its supported organizations; or (c) other supporting organizations that also	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•	
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	, th.	4	ŀ
	Part VI.	6		ļ.
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
•	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent	1.		ł
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	<b>–</b>		
8				
ο-	If "Yes," complete Part I of Schedule L (Form 990).	8		-
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			į .
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	1		ŀ
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	<del></del>	<del> </del>
ь	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b_		<del> </del> -
C	Did a disqualified person (as defined in line 9(a)) 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.	9c		<u> </u>
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting	-	٧.	
	organizations)? If "Yes," answer (b) below.	10a	_	ļ
h	Did the amonization have any excess business holdings in the tay year? Also Schedule C. Form 4720 to	I I		•

Schedule A (Form 990 or 990-EZ) 2014 Charity Global Inc.		22-3936	753 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of			
other Type III non-functionally integrated supporting organizations must complete S	Sections A thro	ugh E	
Section A - Adjusted Net Income		(A) Prior Year	(8) Current Year (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		
Section 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 secunties	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		
e 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 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	<del></del>	
6 Multiply line 5 by 035	6		
7 Recoverles of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		,	Current Year
1 Adjusted net income for pnor year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	-	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enler greater of line 2 or line 3	4	•	<del></del>
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	` ' '	
7 Check here if the current year is the organization's first as a non-functionally-integrinstructions).		upporting organization (s	ee

	t V Type III Non-Functionally Integrated 509(a)(		22-3936	733 Page 7
		3) Supporting Organiza	dons (continued)	
	ion D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exempt put Amounts paid to perform activity that directly furthers exempt purport			<del> </del>
2				
	<del>                                     </del>			
3	Administrative expenses paid to accomplish exempt purposes of s	supported organizations		<del></del>
4	Amounts paid to acquire exempt-use assets			<del></del> _
	Qualified set-aside amounts (prior IRS approval required)			<del> </del>
<u> 6</u>	Other distributions (describe in Part VI) See instructions.			
<del>_7</del> _	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the orga	inization is responsive		
	(provide details in Part VI). See instructions.		<del></del>	
9_	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	1	<del></del>	
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see Instructions)			·
3	Excess distributions carryover, if any, to 2014			
a				
b				
С				
đ				
	From 2013			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
_i_	Carryover from 2009 not applied (see Instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section			
	D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, If			<del> </del>
	any. Subtract lines 3g and 4a from line 2 (if amount	The same		1.2
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).		```	
7	Excess distributions carryover to 2015. Add lines 3j			100 100
	and 4c.			
8	Breakdown of line 7.			
a				
Ь				
С				
d	Excess from 2013 .			
9	Excess from 2014 .			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form	990 or 990	)-EZ) 2	2014_	Chari	ty Glo	<u>dc</u>	al Inc	<u>c.</u>			_			2-393				Page 8
Part VI	Sı	ppleme	ntal	Info	rmation.	Provide the this par	he	explanati	on	s req	uired t inform	y Part ation. (	II, line See in:	10; Pa	art II, lin ons.)	e 17a	or 171	o; and	
Part	II,	Line	10	-	Other	Incom	e	Detai	1										
			•						\$		53	7,139	)		•	,,,			'
•	•														•		•		
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Information about Schedule D (Form 990) and its Instructions is at www.irs.gov/form990,

OMB No 1545-0047 2014 Open to Public

inspection Name of the organization Charity Global Inc. 22-3936753 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor edvised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ Yes ☐ No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **▶** \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (I) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these Items: a Revenue included in Form 990, Part VIII, line 1

Schedule D (Form 990) 2014 Charity	Global Inc	3		22-393675	53	Page 2		
Part III Organizations Maintainin	g Collections o	f Art, Histor	ical Treasures,	or Other Simil	ar Assets	(continued)		
3 'Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):								
a Public exhibition	aГ	Loan or excha	ange programs					
b Scholarly research	e	Other	g- pg					
c Preservation for future generations	- <u>L.</u>	j	•		•			
4 Provide a description of the organization's	collections and expla	in how they fur	ther the organization	's exempt purpose i	in Part			
XIII					• •			
5 During the year, did the organization solicit		•	• • • • •					
assets to be sold to raise funds rather than		s part of the org	anization's collection	1?		Yes No		
Part IV Escrow and Custodial A						_		
Complete if the organization	on answered "Ye:	s" to Form 99	90, Part IV, line 9	9, or reported ar	n amount o	on Form		
990, Part X, line 21						<u></u>		
1a Is the organization an agent, trustee, custo	odian or other interme	ediary for contrib	outlons or other asse	ets not				
included on Form 990, Part X?			-			Yes No		
b If "Yes," explain the arrangement in Part X	III and complete the	following table.						
				].		Amount		
c Beginning balance				. 1	1c			
d Additions during the year				[	1d			
Distributions during the year .				[	1e			
f Ending balance				[	1f			
2a Did the organization include an amount on	Form 990, Part X, III	ne 21, for escro	w or custodial accou	int liability?		Yes No		
b If "Yes," explain the arrangement in Part XI	III Check here if the	explanation has	been provided in P	art XIII				
Part V Endowment Funds.					_			
Complete if the organization	on answered "Yes	s" to Form 99	00, Part IV, line	10.				
	(a) Current year	(b) Prior ya	ear (c) Two ye	ears back (d) Thre	ee years back	(e) Four years back		
1a Beginning of year balance								
b Contributions								
c Net investment earnings, gains, and								
losses								
d Grants or scholarships								
Other expenditures for facilities and								
programs								
f Administrative expenses								
g End of year balance	-							
2 Provide the estimated percentage of the cu	ment vear end balan	ce (line 1a. colu	mn (a)) held as			<del></del>		
a Board designated or quasi-endowment ▶	%		(4),					
b Permanent endowment ▶ %	• • •							
c Temporarily restricted endowment	%							
The percentages in lines 2a, 2b, and 2c sh								
3a Are there endowment funds not in the poss		ration that are h	eld and administere	d for the				
organization by:				- 10. 410		Yes No		
(i) unrelated organizations						3a(i)		
(ii) related organizations		•			•	3a(ii)		
b If "Yes" to 3a(ii), are the related organization	ns listed as required.	 on Schedule Pi				3b		
4 Describe in Part XIII the intended uses of t	•					30		
Part VI Land, Buildings, and Equ		TOWNIE IL IUNGS		<del></del>				
Complete if the organizatio		" to Form 99	n Part IV line 1	I1a See Form 0	ION Dad Y	line 10		
Description of property	(a) Cost or other		) Cost or other basis	(c) Accumulated		(d) Book vatue		
besulption of property	(investment		(other)	depreciation		(u) BOOK Value		
4e Lond	(	<del></del>		a constant				
1a Land				C to Charles Table and the control	(Capacian)	<del></del>		
b Buildings								
c Leasehold improvements			1 402 066	410	446	1 064 600		
d Equipment		<del></del>	1,483,066	418,	240	1,064,620		
e Other	Locusi Form 000 D		\ \mo 40a \	L		1 064 600		
Fotal. Add lines 1a through 1e. (Column (d) must	i equal Form 990, Pa	пх, column (B)	, ime tuc)			1,064,620		

	orm 990) 2014 Charity Global Inc.		22-3936753	Page
Part VII	Investments—Other Securities.	5 000 5 1711	. 441 0 5 000 5 434 "	- 40
	Complete if the organization answered "Yes" to			ie 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation  Cost or end-of-year market val	LIA
0 51		<del>-</del>	Cook of the crystal Harket Va	
1) Financial (		<del></del>	<del> </del>	
	ld equity interests		<del></del>	
3) Other			+ <del></del>	
(A)			<del> </del>	·
(B)		<del></del>		
(C)	•	<del></del>		
.(D)				
, (E)	•			
, (F)		<del> </del>		
(G)	• • •		<del></del>	
.(H) .			-	
	(b) must equal Form 990, Part X, col. (B) line 12.)		<del></del>	<del></del>
Part VIII	Investments—Program Related.	Form 990 Port IV lin	e 11c See Form 000 Part V lim	o 13
<del></del>	Complete if the organization answered "Yes" to	(b) Book value	(c) Method of valuation.	<u>                                     </u>
	(a) Description of investment	(b) Book value	Cost or end-of-year market val	ua.
			Cost of the styles thanks to	
(1)		<del></del>		
(2)				
(3)			<del>                                     </del>	
(4)		<del> </del>		
(5)			<del></del>	<del></del>
(6)				
<u>(7)                                    </u>				
(8)		<u> </u>	-	
(9)	10 10 Dad V and (D) In 40 1 D	-		
	n (b) must equal Form 990, Part X, col (B) line 13.) ►  Other Assets.			
Part IX	Complete if the organization answered "Yes" to	Form 990 Part IV lin	e 11d See Form 990 Part Y lin	na 15
	Complete if the organization answered has to	FOIII 550, Fait IV, III		Book value
	(e) Description	·····	(0)	DOOK VALLE
(1)		<del></del>	<del></del>	
(2)			<del></del>	<del></del>
(3)	-	<del> </del>	<del></del>	<del></del>
(4)		<del></del>		
(5)				···
<u>(6)</u>				
<u>(7)</u>		<del></del>	<del></del>	<del></del>
(8)		· · · · · · · · · · · · · · · · · · ·		
	<del></del>			<del></del>
	a de manuel como ICO Dort Y and ICN line 15 \			
	(b) must equal Form 990, Part X, col. (B) line 15.)	, <u></u>		
	Other Liabilities.	Form 990 Part IV lin	ne 11e or 11f See Form 990 Pa	rt X
Total. (Column	Other Liabilities.  Complete if the organization answered "Yes" to	Form 990, Part IV, lir	ne 11e or 11f. See Form 990, Pa	rt X,
Fotal. (Column Part X	Other Liabilities.  Complete if the organization answered "Yes" to line 25.		ne 11e or 11f. See Form 990, Pa	rt X,
Part X	Other Liabilities.  Complete if the organization answered "Yes" to line 25.  (a) Description of Eability	Form 990, Part IV, lir	ne 11e or 11f. See Form 990, Pa	rt X,
Part X  (1) Federal	Other Liabilities.  Complete if the organization answered "Yes" to line 25.		ne 11e or 11f. See Form 990, Pa	rt X,
Part X  (1) Federal (2)	Other Liabilities.  Complete if the organization answered "Yes" to line 25.  (a) Description of Eability		ne 11e or 11f. See Form 990, Pa	rt X,
Part X  (1) Federal (2) (3)	Other Liabilities.  Complete if the organization answered "Yes" to line 25.  (a) Description of Eability		ne 11e or 11f. See Form 990, Pa	rt X,
Part X  (1) Federal (2) (3) (4)	Other Liabilities.  Complete if the organization answered "Yes" to line 25.  (a) Description of Eability		ne 11e or 11f. See Form 990, Pa	rt X,
Column   Part X	Other Liabilities.  Complete if the organization answered "Yes" to line 25.  (a) Description of Eability			rt X,
Part X	Other Liabilities.  Complete if the organization answered "Yes" to line 25.  (a) Description of Eability			rt X,

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

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

Schedule D (Form 990) 2014 Charity Global Inc.	22-3936	753	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statem	nents With Revenue per	Return.	
Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.		
Total revenue, gains, and other support per audited financial statements		1	44,125,425
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2a -258,1		
b Donated services and use of facilities	2b 338,5	95	
c Recoveries of prior year grants	2c	_	
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2е	80,471
3 Subtract line 2e from line 1	r	3	44,044,954
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	70.4	22	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a 70,4		
b Other (Describe in Part XIII)  c Add lines 4a and 4b	$\begin{array}{c c} 4b & -424,2 \end{array}$		252 071
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		4c	-353,871 43,691,083
Part XII Reconciliation of Expenses per Audited Financial Stater	ments With Expenses n		
Complete if the organization answered "Yes" to Form 990, P		e Netuii	l.
Total expenses and losses per audited financial statements	uit 14, 1110 124.	11	40,106,203
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		·	30/100/105
a Donated services and use of facilities	2a 338,5	95	
b Prior year adjustments	2b		
c Other losses	2c	<del>-</del>  .	
d Other (Describe in Part XIII.)	2d -189,4	44	
e Add lines 2a through 2d			149,151
3 Subtract line 2e from line 1	• •	3	39,957,052
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	4a 70,4	22	
b Other (Describe in Part XIII )	4b		
c Add lines 4a and 4b		4c	70,422
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	40,027,474
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV		4; Part X, Iii	ne
2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide	e any additional information		
Part X - FIN 48 Footnote	-		
charity: water recognizes the effect of inc	nomo tov pocitic		if the
Chartey. Water recognizes the effect of the	ome car positio	ns on	y ii those
positions are more likely than not of being	y sustained. Inc	come q	enerated
	•		
from activities unrelated to charity: water	's exempt purpo	se is	subject to
tou under Teternal Berenue Code Costier E11			
tax under Internal Revenue Code Section 511	. charity: wate	x dra	not
recognize any unrelated business income tax	liability for	the ve	ears ended
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,.	.aro chaca ,
December 31, 2014 and 2013.			
		• •	•
• •			***
		_	
Part YT Line 4h - Perenne Amounts Included	on Botume - Ot		
Part XI, Line 4b - Revenue Amounts Included	on Return - Ot	her	•
			-424.293
Part XI, Line 4b - Revenue Amounts Included Part VIII, Line 8a Year-End Gala revenue-re			-424,293
			-424,293
Part VIII, Line 8a Year-End Gala revenue-re	elated expenses	\$	
	elated expenses	\$	
Part VIII, Line 8a Year-End Gala revenue-re Part XII, Line 2d - Expense Amounts Include	elated expenses	\$ - Oth	er
Part VIII, Line 8a Year-End Gala revenue-re	elated expenses ed in Financials	\$ - Oth \$	er -613,737

### SCHEDULE F (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Charity Global Inc. 22-3936753 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (d) Activities conducted in (a) Region (c) Number of (e) If activity listed in (d) is (f) Total employees, agents, and region (by type) (e.g., a program service, expenditures for fundraising, program services, unvestments. describe specific type of service(s) in region region and investments independent In region contractors grants to recipients in region located in the region) East Asia and the Pacific (1) Pgrm funding-grants Water Programs 1,760,310 South Asia Pgrm funding-grants Water Programs 4,576,013 (2) Sub-Saharan Africa Pgrm funding-grants Water Programs 24,008,661 (3) South Asia Remote Monitoring Water Programs 4,728 (4) Sub-Saharan Remote Monitoring Water Programs (5) 634,411 Sub-Saharan Africa Repair & Maintenance Water Programs 197,795 (6) \_(7)\_ (8) (9) (10)(11)(12)(13)(14)(15) (16)(17)31,181,918 3a Sub-total b Total from continuation sheets to Part I c Totals (add 1 - 2,7 3 1

31,181,918

lines 3a and 3b)

ge <b>2</b>	1
. 22–3936753	
Inc	rganiz
y Global Inc.	tance to O
Charit	Grants and Other Assistance to Organization
Schedule F (Form 990) 2014	Grants and
Schedule F	Part II

	Fart IV, line	line 15, for any recipient who received	pient who recen	ved more than \$5,000 Part II can be duplicated if additional space is needed	an be duplicated if	additional spa	ce is needed.		
-	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(n) Desaription	(f) Method of valuation
	ന്നുബമ്ഷിയാ	section and EIN (if applicable)		पुरम्	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV. appraisal, cthed
Ξ	·.		East Asia	Pgrm funding-grants and the Pacific	1,760,310	Wire Transfer	sfer		
ର		A A A A A A A A A A A A A A A A A A A	South Asi	Pgrm funding-grants a	1,574,018	Wire Transfer	sfer		
ච	14.7	, At	South Asia	Pgrm fundıng-grants a	492,652	Wire Transfer	sfer		
€	*		South Asi	Pgrm funding-grants a	1,200,000	Wire Transfer	sfer		
<b>©</b>		1, -1	South Asi	Pgrm funding-grants	796,245	Wire Transfer	sfer		
9	The Bar.	A STATE OF THE STA	South Asi	Pgrm funding-grants a	213,098	Wire Transfer	sfer		
. 6	÷ -		Sub-Saharan	Pgrm funding-grants m Africa	2,428,529	Wire Transfer	sfer		
· @	1 2 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Sub-Saharan	Pgrm funding-grants n Africa	7,534,654	Wire Transfer	sfer		
<u>'</u> 6	· · · · · · · · · · · · · · · · · · ·	1, 4 . A	Sub-Saharan		189,315	Wire Transfer	sfer		
. (1			Sub-Saharan	Pgrm funding-grants n Africa	10,162,424	Wire Transfer	sfer		
. €	2 % - ,- - ,-	· ·	Sub-Saharan		1,244,896	Wire Transfer	sfer		
(12)	ر جوا ـ پر	28 m 2 m	Sub-Saharan	(3)	175,000	Wire Transfer	sfer		
(13)			Sub-Saharan		1,000,000	Wire Transfer	sfer		
(4	The state of the s		Sub-Saharan	Pgrm funding-grants n Africa	1,200,000	Wire Transfer	sfer '		
(15)	ء . س	# 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Sub-Saharan	Pgrm funding-grants n Africa	73,843	Wire Transfer	sfer		
(16)		# ( # N )							

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2014

<sup>3</sup> Enter total number of other organizations or entities

478588 11/12/2015 2 25 PM

(c) Number of (d) Amount of recipients cash grant
_

Sche	dule F (Form 990) 2014 Charity Global Inc.	22-3936753		Page 4
Pa	rt IV Foreign Forms			
•				
1	Was the organization a U.S. transferor of property to a foreign corporati	on during the tax year? If "Yes,"		
	the organization may be required to file Form 926, Return by a U.S. Tra	insferor of Property to a Foreign	_	
	Corporation (see Instructions for Form 926)		☐ Yes	X No
_				
2	Did the organization have an interest in a foreign trust during the tax ye	, •		
	may be required to file Form 3520, Annual Return To Report Transaction			
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information			
	U.S Owner (see Instructions for Forms 3520 and 3520-A, do not file will	th Form 990)	∐ Yes	X No
3	Did the organization have an ownership interest in a foreign corporation	during the tax year? If "Yes."		
	the organization may be required to file Form 5471, Information Return	,		
	Certain Foreign Corporations (see Instructions for Form 5471)		Yes	X No
	, and the same of	••	. 🗀 😘	
4	Was the organization a direct or indirect shareholder of a passive foreig	n investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization ma	y be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment C	Company or Qualified Electing		
	Fund (see Instructions for Form 8621)		Yes	X No
				L
5	Did the organization have an ownership interest in a foreign partnership	during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Pers	sons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)		Yes	X No
		., .	· <u> </u>	_
6	Did the organization have any operations in or related to any boycotting	countries during the tax year? If		
	"Yes," the organization may be required to file Form 5713, International	Boycott Report (see Instructions		
	for Form 5713, do not file with Form 990)		Yes	X No
	·			
			Schedule F (For	m 990) 2014

#### Part V Supplemental Information

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

Part I, Line 3 - Activities per Region

Region	E	Expenditures	Investment	s
East Asia and the Pacific	\$	1,760,310	\$	0
South Asia	\$	4,576,013	\$	0
Sub-Saharan Africa	\$	24,008,661	\$	0
South Asia	\$	4,728	\$	0
Sub-Saharan Africa	<b>.</b> \$	634,411	\$	0
Sub-Saharan Africa	<b>,</b> \$	197,795	\$	0

Part V - Additional Information

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds charity:water's procedures for monitoring program funding begin with program selection.

Prior to entering into any agreement(s) to fund construction, repair, maintenance, monitoring and evaluation of water projects, partner organizations and entities are subject to a review and must make available to charity: water documentation and/or evidence to support and demonstrate industry best practices in the area of fiduciary due diligence.

This process includes, but is not limited to reviewing:

- -Local registration and employment contracts
- -Independent audit reports
- -Fiscal oversight, recordkeeping and internal controls
- -Procurement, contracting and cash management policy and procedures
- -Program accounting and reporting systems

Part V Supplemental Information

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

Based on the criteria summarized above, partners are then evaluated and appropriate funding and reporting requirements are established. charity: water's Board of Directors formally approves all program funding based on this evaluation as well as a review of specific program deliverables, outputs, and relevant cost and impact metrics. charity: water disburses funds to contracted partners in tranches.

#### Key milestones include:

.. . .

-Establishment of a legally-binding agreement to produce intended program deliverables within an agreed-upon timeframe

٠,

- -Receipt and acceptance of interim progress reports
- -Receipt and acceptance of a final report on program deliverables and a financial reconciliation

Variances to plan are investigated for reasonableness and documented during program implementation and at program completion.

In addition to the procedures noted above, programs are routinely monitored post-implementation, and some are selected for independently-contracted financial audits to ensure that costs incurred and claimed have been properly reported and reasonably stated in compliance with the terms of the agreement(s).

## SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete If the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 8a.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service nation about Schedule G (Form 990 or 990-EZ) and its instructions is at OMB No 1545-0047

Open to Public

Name of the organization  Charity Global Inc	•				Employer Identification 22-3936	
Part I Fundraising Activities. Complete if Form 990-EZ filers are not required to				red "Yes" to Form 9	90, Part IV, line	17
1 Indicate whether the organization raised funds through a				Check all that apply.		·· - · - · - · - · - · - · - · - · - ·
a Mail solicitations	e Solicitation	of no	n-gov	remment grants		
b Internet and email solicitations	f Solicitation	of go	vernn	nent grants		
c Phone solicitations	g 🔲 Special fun	draisi	ng ev	ents		
d in-person solicitations						
<ul> <li>2a Did the organization have a written or oral agreement w or key employees listed in Form 990, Part Vil) or entity</li> <li>b if "Yes," list the ten highest paid individuals or entities (fine ten highest paid individuals or entities)</li> </ul>	in connection with	profe	ssion	al fundraising services?		Yes X No
compensated at least \$5,000 by the organization.	1	l(iii) D	d fund-	<del></del>		1
(I) Name and address of individual or entity (fundraser)	(II) Activity	raise	have obyor rolof	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (1)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6				·		
7						
8						
9						
10						
			▶			
3 List all states in which the organization is registered or li- registration or licensing	censed to solicit co	ontribu	ntions	or has been notified it is	s exempt from	
• • • • •		•		•	•	
	**					• • • • • •

Schedule G (Form 990 or 990-EZ) 2014 Charity Global Inc. 22-3936753 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events Year-End Gala (add col (a) through None (event type) col (c)) (event type) (total number) 1,559,957 1,559,957 1 Gross receipts 1,559,957 1,559,957 2 Less: Contributions 3 Gross Income (line 1 minus line 2) 4 Cash prizes 51,950 51,950 5 Noncash prizes 6 Rent/facility costs 105,230 105,230 23,883 7 Food and beverages 23,883 Direct 8 Entertainment 243,230 243,230 9 Other direct expenses 424,293 10 Direct expense summary. Add lines 4 through 9 in column (d) -424,293 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other garning bingo/progressive bingo col (a) through col (c)) 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes .... 6 Volunteer labor No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net garning income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities. a Is the organization licensed to conduct gaming activities in each of these states? Yes No b If "No," explain: .. .. .. 10a Were any of the organization's garning licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

thedule G (Form 990 or 990-EZ) 2014 Charity Global Inc.	22-3936753 Page :
Does the organization conduct gaming activities with nonmembers?	Yes N
2. Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other en	tty
formed to administer charitable garning?	. Yes N
Indicate the percentage of gaming activity conducted in:	
a The organization's facility	1 <u>3a   %</u>
b An outside facility	13b %
Enter the name and address of the person who prepares the organization's gaming/special events bor records:	
Name ▶	•
Address ▶	
Does the organization have a contract with a third party from whom the organization receives gaming	Π
revenue?	,Yes ∐ N∈
<ul> <li>b If "Yes," enter the amount of gaming revenue received by the organization ► \$</li> <li>amount of gaming revenue retained by the third party ► \$</li> </ul>	, , and the
c If "Yes," enter name and address of the third party:	
Name ▶	
Address ▶	
Gaming manager information	
Name ▶	•
Gaming manager compensation ▶ \$	
Description of services provided ▶	
Director/officer Employee Independent contractor	
Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds	s to
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organization	· · · — —
spent in the organization's own exempt activities during the tax year ▶ \$	
art iv Supplemental Information. Provide the explanations required by Part I, lir	ne 2b. columns (iii) and (v), and
Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide	
instructions).	`
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# SCHEDULE: J

(Form 990)

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.

▶information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Charity Global Inc.

Employer Identification number 22-3936753

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in 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 dub dues or initiation fees		1 :	
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
_	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
b	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		l	
		16		i
	explain	10		
_				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			ļ.
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line	١.		
	1a?	2	├	
				1
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the		1	
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a	'	ł	ł
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III		ŀ	
	▼ Compensation committee ▼ Written employment contract			j
	Independent compensation consultant  X Compensation survey or study		<b> </b>	•
	X Form 990 of other organizations X Approval by the board or compensation committee	1	•	
		İ	۱ -	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.		ł	
e	Receive a severance payment or change-of-control payment?	48		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
Ċ	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
-	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		۶.	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		١,	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	l ·	l '	
	compensation contingent on the revenues of	İ		
а	The organization?	5a		X
b	Any related organization?	5b		X
_	If "Yes" to line 5a or 5b, describe in Part III.			Ι.
		١.	!	i '
R	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	* .		-
Ū	compensation contingent on the net earnings of:			
_	The organization?	6a	•	x
a 5	Any related organization?	6b		X
D	If "Yes" to line 6a or 6b, describe in Part III.			<del>  ==</del>
	If the to line of the option assume in Fart in.	1		Ι,
_	For some littled in Form 600. Book VII. Control A. Ing. 40, did the assessmention are side any one fixed	-		-
7		.		₩
_	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			1
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			-
	in Part III	8		X
			-	1
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		L

Schedule J (Form 980) 2014 Charity Global Inc.
Part Il Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (ii) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not fisted on Form 990, Part VII.

Nota. 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.

Page 2

Note: 11th Sunt of Colonials (BAU)—(iii) for each listed individual must equal trie foral amount of Point 990, Part VII, Section A, line 1a, applicable column (L) and (E) amounts for that individual	st equal the total amou	Designation of 147 and 1990, Part VII	VII, Section A, line	1a, applicable colum	n (U) and (E) amou	ats for that individua	1
(A) Name and Title	-I 8	(ii) Bonus & moentive	(III) Other reportable compensation	other deferred	(U) Nontexable  benefits	(E) 1 de d commis (B)(i)-(D)	(F) Compensation In column (B) reported as deferred in prior Form 990
Scott Harrison	m 220,705	0;0	216	606'8	6,579	236,409	
oph Gorder	249,17	0	252	10,410	22,158	281,997	
fficer	.	o	:	0	0	0	· <b>o</b>
1 Letta	m 148,133	0.0	108	9,000	6,533	160,774	0 0
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9	<b>3 6</b>	-			-	:	:
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6	(a)		-				:
	(6)	-			-		
	0			-	:		
	(I) (Fi)				:		,
13	(t)			-			:
14	(n)		•				
16	(0)			·			
)	(1)						

Schedule J (Form 980) 2014

Schedule J (Form 990) 2014 Charity Global Inc. Partill. Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information

22-3936753

Schedule J (Form 990) 2014

:

## 478586 11/12/2015 2 25 PM

## SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

Open To Public

► Attach to Form 990 or Form 990-EZ.

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

Inspection

Dort 1	Charity Global I		(-)(0)		-> / ^ ·			-39367	رر				—
Part I	Excess Benefit Transact								<b>^</b> L		•		
	Complete if the organization ans				_		m 990-EZ, Part	V, IINE 4	UD.		T 40		
1	(a) Name of disqualified person	(to) Relatio	(b) Relationship between disqualified person and organization				(c) Description of transaction					(d) Corrects	
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(4)						<del></del>					┼──	+	_
(5)							·				├	-	
(6)											1		
	he amount of tax incurred by the org	-		ı pe	rson		ear	•					
	section 4958 he amount of tax, if any, on line 2, a	hove reimbursed i		tion					<u> </u>			-	_
3 Elle	He amount of tax, it any, on the 2, a	ibove, reiiriburaed i	y the Organiza			••			<i>'</i> —		-		
B24 D.	Town to a No Provide	torreted Descri				<del> </del>	<del></del>						
Part_II	Loans to and/or From In				r		00 5 4 5 4 11 6						
	Complete if the organization ans				ine	38a or Form 9	90, Part IV, line 2	6; OF IT T	ne				
	organization reported an amount (a) Name of interested person	(b) Relationship			nan tr	(e) Onginal	(f) Balance du	I (a) In	defa dt'	I may A	nomunei	(i) V	delita
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Part III	Grants or Assistance Be												
	Complete if the organization ans	wered "Yes" on For	m 990, Part IV	, line	27	<u> </u>							
	(a) Name of Interested person	(b) Relations	ship between intere	sted	(c) A	Amount of assistance	(d) Type of assista	ice	(e)	Purpos	e of ass	istance	
		person a	and the organization		L_								
(1)													
(2)					Ľ.					_			
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	ork Reduction Act Notice, see the										-	)-EZ)	20

Schedule L (F	orm 990 or 990-EZ) 2014 Charity	Global Inc.		22-3936753	<u>Pa</u>	<u>ige 2</u>
Part IV	<b>Business Transactions Involvin</b>					_
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line 28	a, 28b, or 28c			
	(a) Name of interested person	(b) Relationship between	(c) ~mount of	(d) Description of transaction	(e) Si	haring om
		Interested person end the organization	transaction			org Nes?
			105 210		Yes	No
Viktor	ia Harrison	Spouse- S.H.		COMPENSATION		X
Lauren	Letta	Spouse- M.L.	131,484	COMPENSATION	+	x
3)			-			<del> </del> —
4)					$\dashv$	<del> </del>
5) 5)					+	-
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Part V	Supplemental Information					
	Provide additional information for response	es to questions on Schedule L (	see instructions).			
Schedu	le L, Part V - Addit	ional Information	n.			
			<del></del>			
Scott	Harrision and Viktori	<u>la Harrision have</u>	a family	relationship.		
Michae	el Letta and Lauren Le	etta have a fami	ly relation	ship.		
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## SCHEDULE M (Form 990)

**Noncash Contributions** 

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Information about Schedule M (Form 990) and its Instructions is at www.lrs.gov/form990.

Inspection Employer identification number

		TODAT	. inc.			22-39	36/5	3		<b></b>
_ <u>P</u>	art I Types of Property									
		(a)	(b)	(C)		(d	)			
			Number of contributions or	Noncash contribution amounts reported on		Method of o	determining			
			items contributed	Form 990, Part VIII, line 1g		noncash contrib	oma roitu	unts		
1	Art - Works of art									
2	Art — Historical treasures									
3	Art — Fractional interests									
4	Books and publications			<del></del>		<del></del>				
5	Clothing and household									
J	goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property	<u> </u>	<del></del>							
9	Securities — Publicly traded	X		2,984,776	FMV a	t time o	of s	ale		
10	Securities - Closely held stock									_
11	Securities — Partnership, LLC,									
	or trust interests									
12	Securities — Miscellaneous									
13	Qualified conservation					·				-
	contribution — Historic									
	structures	1								
14	Qualified conservation									
	contribution — Other									
15	Real estate — Residential									
16	Real estate — Commercial									
17	Real estate — Other									
18	Collectibles				<del></del>	-				
19	Food inventory									
20	Drugs and medical supplies									
21	• '' •		<del></del>		-					
	Taxidermy Historical artifacts	<del></del>								
22									—	
23	Scientific specimens									
24	Archeological artifacts	x	40	271,255	Donom	Chahad	E9417	-	—	
25	Other > (Supplies/Equip )	X	6	51,950		Stated		-		
26	Other > (Special Events)	-		31,930	DONOL	Stated	PMV			
27	Other ►()		<del></del>			<u> </u>				
28	Other ►(					_				
29	Number of Forms 8283 received by	_								
	which the organization completed Fo	nm 8283, F	Part IV, Donee Acknowle	edgement (	29 0					<del></del>
									Yes	No
30a	During the year, did the organization	-	* * *	* -	_			1	ļ.·	•
	28, that it must hold for at least three	years from	n the date of the Initial o	contribution, and which is no	ot required			_		'
	to be used for exempt purposes for t	he entire h	olding period?					30a		X
b	If "Yes," describe the arrangement in	Part II								ļ
31	Does the organization have a gift acc	ceptance p	olicy that requires the re	eview of any non-standard					-	ł
	contributions?		,					31	X	
32a	Does the organization hire or use thi		or related organizations	to solicit, process, or sell n	oncash	•				
	contributions?		-					32a	L	X
b	If "Yes," describe in Part II.				•		•	· ·		
33	If the organization did not report an a	imount in c	olumn (c) for a type of t	property for which column (a	a) is checked	i,		<u>.</u>	-,'	
	describe in Part II	-	,,	• •	-			l .		

SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Charity Global Inc.

Employer Identification number 22-3936753

Form 990 - Part I, Line 1 and Part III, Line 1 - Organization's Mission charity: water is a non-profit organization bringing clean and safe drinking water to people in developing nations. We inspire giving and empower others to fundraise for sustainable water solutions. We send 100% of public donations to our local partners on the ground, who build and implement the projects. When the projects are completed, we prove every one of them using GPS coordinates, photos and details of the community served.

Form 990, Part III, Line 4d - All Other Accomplishment

Kenya ranks 147 out of 187 countries on the Human Development Index and
faces severe water problems along with its growing population of refugees
from neighboring conflicts. With an estimated 580,000 refugees and an
additional 309,200 internally displaced persons, Kenya cannot provide
almost half of its rural population with an improved water source and over
70% lack access to improved sanitation. Nearly 60% of Kenyans are under 25
and over 1.5 million live with HIV/AIDS, compounding Kenya's health and
disease problems. Clean water can reduce the risk of disease and ensure a
better, healthier life for families, especially children. In 2014, charity:
water made our biggest grant to Kenya to date, funding 46 water projects
that can serve 30,156 people.

Ranking 164 of 187 on the Human Development Index, Uganda continues to face difficulties as a result of two decades of civil war, which displaced more than 1.6 million people, 80% of whom were women and children. Given the

persisting violence in northern regions, many of these internally displaced persons are unable to return home. For rural Ugandans, only around a third have access to improved sanitation and 29% lack access to improved water sources. Clean water projects help to rebuild communities after years of after displacement, improving health and quality of life. In 2014, charity: water funded 65 water projects in Uganda that can serve 40,719 people.

Rwanda is the most densely populated country in Africa, with almost 45% of the population living below the poverty line. The district of Rulindo, with improved water coverage at a meager 40%, faces severe clean water access issues. Waterborne diseases are a leading cause of death in Rwanda, where around a third of the population lacks access to improved water and sanitation. In 2014, charity: water funded 34 water projects that can serve 18,554 people.

With the second highest infant mortality and birth rate in the world and a median age of just 16 years old, Mali faces severe water access issues with its growing population. Ranking 176 out of 187 on the Human Development Index, Mali struggles to provide improved water sources to almost half of its rural population, and over 85% of people in rural areas lack improved sanitation facilities. As desertification continues in the Sahel region, Mali will experience increasing pressure on its water resources. In 2014, charity: water funded 128 water projects to help 37,460 people in Mali access clean water.

After its devastating civil war, Mozambique has faced extreme poverty and severe unhealthy living conditions, particularly as it relates to water

quality. In addition, floods and earthquakes exacerbate the growing water crisis. With the 22nd highest child mortality rate in the world, many children don't see their 5th birthdays. Recently, Mozambique, ranked 178 of 187 on the Human Development Index, has made access to clean water a major priority, as improved water and sanitation coverage rates are currently extremely low, at 35% and 11%, respectively. In 2014, charity: water invested in 63 water projects in Mozambique that can serve 29,576 people.

Niger currently ranks at the bottom of the Human Development Index at 187. On average, Nigeriens only receive 1.4 years of schooling and almost half of the population is under 14 years old. With the world's highest birth rate, population growth poses a future problem for access to clean water, particularly in rural areas where currently only 42% of people have an improved water source and just 3% have improved sanitation. Waterborne diseases are among the leading causes of death, but access to clean water can dramatically improve health and life expectancy. In 2014, charity: water invested in 200 projects that can serve 58,000 people.

Around a third of the world's poor live in India and over 43% of children under 5 are underweight. Ranking 135 out of 187 on the Human Development Index, India faces difficult barriers to development including population growth and unimproved access to sanitation for over 3/4 of its rural population. In particular, the states of Orissa and Bihar are characterized by extreme poverty and contain large populations of historically disadvantaged groups, especially Schedule Caste and Tribe members. Orissa and Bihar experience high rates of health problems related to water and sanitation, water quality concerns, and exploitation of water resources.

Name of the organization

Charity Global Inc.

Employer Identification number 22-3936753

Arsenic is another threat to water quality; in West Bengal, nine arsenicridden districts make water unsafe for more than 5 million people, whose only water option is open ponds shared with livestock. In 2014, charity: water funded 88 projects in these states that can serve 22,400 people.

Ranking 142 out of 187 on the Human Development Index, Bangladesh is the ninth most populous nation in the world, but is slightly smaller than Iowa, making it one of the most densely populated. Over 42% of the rural population lacks access to improved sanitation and 15.6% lack improved water sources. Almost 1/3 of the population lives below the poverty line and there is a high risk of infectious disease, particularly waterborne disease. In 2014, charity: water funded 546 water projects that can serve 122,661 people in Bangladesh.

Cambodia is ranked 136 out of 187 on the Human Development Index. With a population of approximately 15.7 million, Cambodia is one of the poorest countries in East Asia. Access to sanitation and improved hygiene practices remains a considerable health challenge in rural areas, as only 67% of families have access to an improved water source and 25% have access to improved sanitation. Monsoons and flooding often compound water quality issues and waterborne disease is one of the leading causes of illness in the country. In 2014, charity: water funded 816 water projects that can serve 150,600 people in Cambodia.

Form 990, Part VI, Line 2 - Related Party Information Among Officers Michael Letta, CFO and Lauren Letta, Chief of Staff, have a family relationship.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
The return preparer emails a draft of the Form 990 to management for internal review. Revisions are input by the return preparer and a revised draft is emailed to the engaged independent accounting firm for review.

After all changes are made and agreed to by the engaged independent accounting firm, the final Form 990 is then sent by the return preparer via email to the Founder/CEO, CFO and Finance Committee for final review. Once final approval is obtained from the above-seated officers, the final Form 990 is sent to management for signature and a copy of the final Form 990 is forwarded to all seated Board Members prior to filing with the IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
In connection with any actual or possible conflict of interest, any
director, officer, key employee, or member of a committee with the
governing board must disclose the existence of the financial interest and
be given the opportunity to disclose all material facts to the directors
and members of committees with governing board delegated powers considering
the proposed transaction or arrangement.

Each interested person shall annually sign a statement which affirms such person:

- a. Has received a copy of the conflict of interest policy,
- b. Has read and understands the conflict of interest policy,
- c. Has agreed to comply with the conflict of interest policy, and
- d. Understands the Organization is charitable and in order to maintain its federal tax exemption it must engaged primarily in activities which accomplish one or more of its tax-exempt purposes.

Name of the organization

Charity Global Inc.

Employer Identification number 22–3936753

In addition, on such statement, interested persons shall disclose or update their interests that could give rise to a conflict of interest, such as a list of family members, substantial business or investment holdings, and

other transactions or affiliations with businesses and other organizations

and those of family members.

To ensure the Organization operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, regular and consistent reviews (at least annually) shall be conducted. The reviews shall, at a minimum, include the following subjects:

- a. Whether compensation arrangements and benefits are reasonable, based on competent survey information, and the result of arm's-length bargaining.
- b. Whether partnerships, joint ventures and arrangements with management organizations conform to the Organization's written policies are properly recorded, reflect reasonable investments or payments for goods and services, further charitable purposes and do not result in inurement, impermissible private benefit or in an excess benefit transaction.
- c. Whether the governing board and all committees with board delegated powers is properly implementing this conflict of interest policy.
- d. Whether any improvements should be made to this conflict of interest policy.

When complying with this conflict of interest policy, the Organization may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the governing board of its responsibility under this conflict of interest policy.

Form 990, Part VI, Line 15a - Compensation Process for Top Official The process includes the following elements:

Schedule O'(Form 990 or 990-EZ) (2014)

ame of the organization Charity Global Inc. Employer identification number

22-3936753

- (1) advance approval by the independent board of directors ("Board") or the independent compensation committee of the Organization;
- (2) use of appropriate comparability data; and
- (3) contemporaneous documentation.
- 1. Advance Review The Board or compensation committee shall review and approve compensation arrangements in advance, provided that persons with a conflict of interest with respect to a given compensation arrangement do not participate in the review or approval of such compensation arrangement.
- 2. Comparability Data To determine reasonable compensation, the Board or compensation committee shall obtain and rely on appropriate comparability data, including, but not limited to:
- (i) compensation levels paid by similarly situated organizations, both taxable and tax-exempt, for functionally comparable positions;
- (ii) the availability of similar services in the geographic area of the Organization;
- (iii) current compensation surveys compiled by the independent firms; and
- (iv) actual written offers from similar organizations competing for the services of the person.
- 3. Contemporaneous documentation The Board or compensation committee shall contemporaneously document the basis for its compensation determination, including documentation:
- (i) the agreed-upon terms and date of approve;
- (ii) the members of the Board or compensation committee who:
- (a) were present during debate on the compensation arrangement and
- (b) voted on the compensation arrangement;
- (iii) the comparability data obtained and relied upon and how such data was obtained; and

22-3936753

- (iv) any actions taken with respect to consideration of the compensation arrangement by anyone who is otherwise a member of the Board or compensation committee but had a conflict of interest with respect to such compensation arrangement.
- 4. The most recent compensation review occurred in 2014.

Form 990, Part VI, Line 15b - Compensation Process for Officers

See Schedule O, Form 990, Part VI, Line 15a - Compensation Process for Top

Official. This policy is also applicable to the organization's top

financial officer, the CFO. The most recent compensation reviewed occurred in 2014.

Form 990, Part VI, Line 17 - Other States Where Copy of Return is Filed Kentucky, Massachusetts, Maryland, Maine, Michigan, Minnesota, North Carolina, North Dakota, New Hampshire, New Jersey, New Mexico, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Utah, Virginia, Washington, Wisconsin, West Virginia, Mississippi, Nevada

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation charity: water's governing documents, conflict of interest policy and Form 990's are available to the public upon request by emailing info@charitywater.org. The organization's annual reports, independent audit reports and annual financial statements are available online at charitywater.org/about/financials.