Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2015 Open to Public

OMB No 1545-0047

Inte	emal Rever	nue Service	'y	Information abo		and its instructions					Inspe	ction
A	For th	e 2015 e	alendar year, or tax			, and ending	_					
В	Check if a	applicable:	Name of organization						D Em	ployer	identification nu	mber
	Address (change		Charity G	lobal I	nc.						
H	í	•	Doing business as	charity:		<u> </u>			7 22	-39	36753	
Ц	Name ch	enge	Number and street (or P (ddress)		Room/suite	E Tek	ephone	number	
	Initial retu	ım.	40 Worth St		_		_	330	64	<u>6-6</u>	588-2323	<u> </u>
\sqcap	Final retu		City or town, state or prov	nnce, country, and ZIP o	r foreign postal	code		-				
H	j terminateo 1		New York		NY 1001	.3			G Gm	es rece	ants 70,9	61,967
Ш	Amended	return	Name and address of prin					T -				
	Application	n pending	Scott Har	rison				H(a) İsthisa	group retu	ım for s	ubordinates Y	′es 🔀 No
			40 Worth		#330			H(b) Are all s	uhordinati	es inch	uded? TY	es No
			New York	oc. burce		10013					(see instructions)	· .
_							T	┨	•• •••••		(000,	
<u></u>		mpt status		501(c) () ◀	(insert no)	4947(a)(1) or	527	╡				
<u>1</u>	Website:		w.charityw					H(c) Group e				
_		organization		ust Association	Other -		L Y	eer of formation: 4	2006		M State of legal o	tomale: NY
	<u>Part I</u>	<u>Su</u>	nmary						_			
	1 1 6	Briefly de	scribe the organization	n's mission or mos	t significant	activities:						
8		See	Schedule 0									
뎔												
Governance	.	••										
Š	2 0	Check∕th	box ▶ if the orga	nization discontinu	 ed its operat	ions or disposed of	more than 2	5% of its net	essets	•		
≪5			f voting members of the			4-1	more train 2	.570 01 113 1160	3300	· 2	8	
									· -	*	7	
Activities	1 7 1	./_95/	independent voting r	nembers of the go	verning body	(Part VI, line 1b)			⊢	-		
₹	5	Votet hun	ber of Individuals emp	oloyed in calendar y	ear 2015 (P	art V, line 2a)			L	5	96	
Ą	6/1		ber of volunteers (est						. L	6	550	
	7 a⊺	Total unn	lated business revenu	ue from Part VIII, c	olumn (C), lı	ne 12			. L	7a		0
	461	Net unrel	ted business/taxable	phoome from Form	990-T, line	34			· [7b		0
	I_ ,;	~~\\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	12	S)				Prior Y			Current '	
a	8 0	Contributi	is and grants (Part	YN, line 1h)			Ţ	43,69	0,25	59↓	35,12	7,416
2	9 F		ervice revenue (Falt	Mill 6 2\			· [0	<u> </u>	0
Revenue	10 1		t income (Part VIII, oc		4. and 7d)		· ·	40	0,0	72	24	3,121
~	11 0		nue (Part VIII, column				··· ·	-30	9,24	18	-24	2,795
				· ·				43,69				7,742
			nue – add lines 8 thro									
			d similar amounts paid			3)	· ·· -	30,34	4,90	24	26,13	<u>2,893</u>
			aid to or for members				-			ᆜ		0
es	15 5	Salaries,	ther compensation, e	mployee benefits (Part IX, colu	mn (A), lines 5-10)	۱ لـ	5,82	5,4	31	<u>6,30</u>	<u>3,020</u>
Expenses	16aF	Professio	al fundraising fees (P	art IX, column (A),	line 11e)		L			0		<u>0</u>
9	. ьт	Total fund	raising expenses (Par	t IX, column (D), li	ne 25) 🕨	3,076,37	/8 L					
ŵ	17 0	Other exp	enses (Part IX, colum	n (A), lines 11a-11	ld. 11f-24e)		··· [3,85	7.05	59	3,80	3,834
	18 7	Total exp	nses. Add lines 13-1	7 (must equal Part	IX column	(A) line 25)		40,02				9,747
			ess expenses. Subtra			(, t),to 20)	· · · ·	3,66	3 60	nal		2,005
75	6	<u> </u>	ess expenses. Subra	or mile to nom mile	14,,,,,,,		· · · · +	Beginning of C			End of Y	
Net Assets or	ยื่อกา	Total acc	ts (Part X, line 16)					55,59				8,524
200	24 7		ties (Part X, line 26)				·· · · ·	26,64				0,203
E E	8						· · -					
	22.		or fund balances. Su	ibtract line 21 from	line 20		<u></u>	28,94	7,0	/4	26,03	8,321
_	Part II		nature Block									
Ļ	Inder per	natues of	erjury, I declare that I ha	eve examined this ref	um, including	accompanying schedu	ules and state	ments, and to t	ine best	of my	knowledge and	d belief, it is
	rue, corre	ect, and c	mplete. Declaration of p	reparer (other than o	micer) is base	d on all information of	wnich prepar	er nas any kno	wieage.			
		 	<u> </u>	1 11	`					-	11/1+/1	<u> </u>
Si	gn] ▼ Si	nature of officer	(1						Date	/ /	
He	ere				Mick	rael Gi	amble.	v . C3	10			
		\overline{t}	pe or print name and title									
_		Print/Type	preparer's name		Preparer's sig	nature ,	. 	Date		Check	if PTIN	
Pai	id	KPMG,	T.D		ן ינ	dema	man	11/1	4/16 s		bloyed PO124	9521
	ерагег			T.T.D	<u> </u>		<u>,. </u>					
	e Only	Firm's nai							Firm's El	IN P	<u>13-55652</u>	<u> </u>
- 5	Ciny	1		Park Ave	404-4						010 55	
_		Firm's ad		ork, NY	10154				Phone n	0	212-758	
	<u> </u>		this return with the p			structions)	<u></u>	<u> </u>	<u> </u>	<u></u>	X Ye	
For DA		ork Redu	ction Act Notice, see t	he separate instruc	tions.			<u>-</u>			Form	990 (2015)
U/V	•					// /	1					
						<i>←</i>) " <i>I</i>					
							ノ ン					(

orm 990 (201	5) Charity	Global I	nc.		22-3936753		Page 2
Part III	Statement of	f Program Ser	vice Accomplisi		ne in this Part III		
1 Briefly de	escribe the organi						
See So	chedule 0				., ., .,,,		
2 Did the c	organization under	take any significant	program services du	ring the year which	ch were not listed on th	e	<u></u>
prior For	m 990 or 990-E Z 7						Yes X No
If "Yes,"	describe these ne	w services on Sche	edule O				
3 Did the c	organization cease	conducting, or ma	ke significant changes	s in how it condu	cts, any program		_ =
services?							Yes X No
		anges on Schedule					
					argest program service		
			•	•	amount of grants and a	llocations to others,	
the total	expenses, and rev	venue, if any, for ea	ach program service r	reported.			
4a (Code					9,782,475		
improve the constant	red sanita cuntry wh encing the charity:	ation. Acc ere chari he worst water fu	cess number ty: water o drought in nded 962 w erving 238	rs are evenues, ar 30 years pro 7ater pro 7169 peop	nd as of 201 s, further jects in Et ple.	the rural 15, Ethiopi increasing	regions of la is need. In
			• • • • • • • • •				• • • • • • •
contri Althou source are po far av which implem landsl funded additi	bal, 25% buting to all about to less to corly convay from poses undentation, ides imposed 288 wat onal info	of the po o its rank 92% of the han 45% he structed, the villation ique chall and naturated access or projector	k of 145 or he rural possible as access and a clear ge. Nepal lenges and iral disast to the motes that car	ives belout of 18 opulation to improvan water s geogram opportunters such ost remove!	ow the pover B on the Hum has access wed sanitation supply is extractives in wall as earthquite areas. In 54,123 people.	rty line, man Develop s to an implement inter emely mountaiter project lakes, floor 12015, challe. (See So	tainous, ct oding, and arity: water chedule O fo
Rwanda the po the Hu covera Waterb quarte	is the pulation man Deve at a corne discorre the	most dense living be lopment I meager 44 asses are population	ely populated by the populated by the populate of the populate	ted count overty li district evere clo cause of ccess to	ne, and ran of Rulindo, ean water ac death in I improved wa	ca, with all ks 163 out with important cess issue the later and 38 atternant and 38 atterna	roved water es. ere around a 3% lack
access that c	to sani	80,537 p	n 2015, cha eople	arity: wa	ater funded	217 water	
		escribe in Schedule		10 446 64	••		
(Expense	s \$ 12,9	20,302 indu	oding grants of \$	10,440,36	(Revenue \$		
4e rotal prog	gram service expe	enses ▶ 2	3,U12,21U				

	to the experience described in section E04/aV(2) or 4047/aV(4) (ather than a secret foundates) 0.16.19/a 2		Yes	N
ı	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
?	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	T
}	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to.	-		Γ
	candidates for public office? If "Yes," complete Schedule C, Part I	3		
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		L
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			l
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			١
	Part III	5		Ļ
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			l
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			l
	"Yes," complete Schedule D, Part I	6		L
	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u>'</u>		١
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Ļ
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	! .		l
	complete Schedule D, Part III	8		ļ
	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a]		l
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	1 _ '		l
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		ł
	Did the organization, directly or through a related organization, hold assets in temporarily restricted	١		l
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		ł
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	ĺ.,		l
	VII, VIII, IX, or X as applicable			l
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		v	ł
	complete Schedule D, Part VI	11a	X	╀
,	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	446		l
	of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b		╀
	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 167 if "Yes," complete Schedule D, Part VIII	11c		╀
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			l
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	╁
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		t
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	X	l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			t
	Schedule D, Parts XI and XII	420	X	l
	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a	_	t
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		l
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		t
	Did the exampleation maintain an office, employees or agents outside of the United States?	14a	X	t
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			t
	fundraising, business, investment, and program service activities outside the United States, or aggregate	1		ľ
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	١
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	<u> </u>		t
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	١
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			t
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		1
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<u> </u>		t
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			t
	Part VIII lines 1s and 9s2 ff "Vos " complete Schodule G. Part II	18	X	l
				t
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			

Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? ... 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes." complete Schedule L. Part I 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X If "Yes," complete Schedule L, Part I 25b 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 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 X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 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) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 X 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 19? Note. All Form 990 filers are required to complete Schedule O.

F <u>om</u>	1 990 (2015) Charity Global Inc. 22-3936753		_ P:	age 5
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 50 1b 0	1		
b		1		
_ C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	├ └		-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 96			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	Ì
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	i		
	account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	l		
	(FBAR).	İ		Ì
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
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	1		1
_	gifts were not tax deductible?	6b		_
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	١_	•	
	and services provided to the payor?	7a	X	-
D	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		<u> </u>
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoning organization have excess business holdings at any time during the year?	8		i
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter.	1		1
а	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		l
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.	1		
b	Enter the amount of reserves the organization is required to maintain by the states in which	ĺ		1
	the organization is licensed to issue qualified health plans	1		
C	Enter the amount of reserves on hand	44-	<u> </u>	x
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b DAA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		000	(2015)

Form	<u>n 990 (2015) Charity Global Inc. 22-3936753</u>		P	<u>age 6</u>
Pa	Irt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a	and for	r a "N	<u>10,</u>
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8			
•	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			ĺ
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7	1 1		l
	· · · · · · · · · · · · · · · · · · ·	} {		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		v	
_	any other officer, director, trustee, or key employee?	2	X	— —
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	_	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization'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 elect or appoint	1		
	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) members,	1 1		1
	stockholders, or persons other than the governing body?	7b_		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	.]		
а	The governing body?	8a	X	ĺ
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 reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Co	de)	
	The state of the s		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 exempt purposes?	10b		
110	• • • • • • • • • • • • • • • • • • • •		X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	_	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ا ۱۰ ا	v	
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 interests that could give rise to conflicts?	12b	<u> </u>	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1. 1		1
	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	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by			l
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	t l		ĺ
а	The organization's CEO, Executive Director, or top management official	15a	X	L _
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	(l
	with a taxable entity during the year?	16a		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			
		16h		l
Sec	organization's exempt status with respect to such arrangements?	16b	L	
	tion C. Disclosure	77	KC_	
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, HI	, +# /:		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website V Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	chael Gumbley c/o charity:water 40 Worth Street, Suite 330			
<u>Ne</u>	w York NY 10013 646	<u>-68</u>	<u>8-2</u>	<u> 323</u>

Form 990 (20	015) Charity Global Inc.	22-3936753	Page 7						
Part Vii	Compensation of Officers, Directors, Tru Independent Contractors	compensation of Officers, Directors, Trustees, Key Employees, Highest Compensation dependent Contractors							
	Check if Schedule O contains a response or	note to any line in this Part VII	<u>, </u>						
Section A.	Officers, Directors, Trustees, Key Employees, and	Highest Compensated Employees							
1a Complete organization's	this table for all persons required to be listed. Report comes tax year.	pensation for the calendar year ending with or within the							
	of the organization's current officers, directors, trustees (vn. Enter -0- in columns (D), (E), and (F) if no compensation	whether individuals or organizations), regardless of amount n was paid.	of						
List all	of the organization's current key employees, if any. See it	nstructions for definition of "key employee."							
who received	e organization's five current highest compensated employed reportable compensation (Box 5 of Form W-2 and/or Box and any related organizations	ees (other than an officer, director, trustee, or key employee 7 of Form 1099-MISC) of more than \$100,000 from the	e)						

• 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (F) Name and Title Reportable Reportable Estimated Average hours per (do not check more than one compensation compensation from amount of related week box, unless person is both an from other officer and a director/trustee) organizations compensation (list any the (W-2/1099-MISC) from the hours for organization related (W-2/1099-MISC) organization stitutional Ividual and related organizations employee organizations below dotted compensate (me) trustee (1) Scott Harrison 50.00 Founder/CEO 0.00 X X 247,962 0 14,662 (2) Michael Wilkerson 2.00 0.00 Chairman X X 0 0 0 (3) Gian-Carlo Ochoa, PHD 2.00 0.00 X X 0 0 0 **Treasurer** (4) Brook Hazelton 2.00 Secretary 0.00 X X 0 0 0 (5) Chi-Hua Chien 2.00 Board Member 0.00 0 0 X 0 (6) Brant Cryder 2.00 0.00 Board Member X 0 0 0 (7) Valerie Donati 2.00 Board Member X 0 0 0 (8) Shannon Sedgwick Davis 2.00 0 Board Member 0.00 X 0 0 (9) Christoph Gorder 50.00 Chief Water Officer 0.00 0 X **247**,710 32,654 (10) Michael Gumbley 50.00 VP of Finance 0.00 X 0 24,030 135,755 (11) Michael Letta 50.00 (Ending 6/30/15) 0.00 7<u>4,</u>101 0 CFO 3,511 Form **990** (2015) Form 990 (2015) Charity Global Inc.

152,226 35,127,742

326

d All other revenue . .

e Total. Add lines 11a-11d

12 Total revenue. See instructions.

Part IX Statement of Functional Expenses										
Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign	}		j						
	individuals. See Part IV, lines 15 and 16	26,132,893	26,132,893							
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	1,156,759	449,888	489,999	216,872					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and			}						
	persons described in section 4958(c)(3)(B)	233,249		169,408	63,841					
7	Other salaries and wages	4,017,692	1,049,670	1,702,085	1,265,937					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	101,911	25,019	36,556	40,336					
9	Other employee benefits	322,247	81,802	131,490	108,955					
10	Payroll taxes	471,162	119,115	198,798	153,249					
11	Fees for services (non-employees):									
а	Management ,									
b	Legal	12,095	3,150	5,590	3,355					
C	Accounting	128,996	67,901	61,095						
d	Lobbying									
е	Professional fundraising services. See Part IV, line									
f	Investment management fees	74,821		74,821						
9	Other. (If line 11g amount exceeds 10% of line 25, column									
	(A) amount, list line 11g expenses on Schedule (I)	942,460	436,163	232,394	<u>273,903</u>					
12	Advertising and promotion									
13	Office expenses	593,525	106,301	171,117	316,107					
14	Information technology									
15	Royalties									
16	Occupancy	407,435	105,002	169,026	133,407					
17	Travel	495,566	166,112	128,215	201,239					
18	Payments of travel or entertainment expense	•		j						
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	505,999	130,403	209,916	165,680					
23	Insurance	165,761	42,719	68,767	54,275					
24	Other expenses, Iterrize expenses not covered		Ì	j						
	above (List miscellaneous expenses in line 24e. If									
	line 24e amount exceeds 10% of line 25, column									
	(A) amount, list line 24e expenses on Schedule (Q.)									
а	Bank Charges	301,882		301,882						
b	Repairs of water projects	54,009	54,009		 					
C	Remote Monitoring	42,063	42,063							
d	Event Costs	41,158			41,158					
	All other expenses	38,064			38,064					
	Total functional expenses. Add lines 1 through 24e	36,239,747	29,012,210	4,151,159	<u>3,076,378</u>					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solioitation. Check here	}								
DAA	following SOP 98-2 (ASC 958-720)				Form 990 (2015)					

	Check if Schedule O contains a response or note to any line in this Part X	<u></u>	<u></u>	<u></u>
_		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing	2,365	1	5,412
] 2	Savings and temporary cash investments	12,559,786	2	23,517,211
3	Pledges and grants receivable, net	16,039,934	3	15,397,246
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
ı	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section			
ſ	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
	organizations (see instructions). Complete Part II of Schedule L		6	
7			7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	676,050	9	382,806
10a	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 3,620,365			
Ь	Less: accumulated depreciation 10b 824,904	1,064,620	10c	2,795,461
11	Investments—publicly traded securities	25,121,169	11	11,117,422
12	Investments—other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Internalisis accepts		14	
15	Other courts See Bort IV line 44	132,966		132,966
16	Total assets. Add lines 1 through 15 (must equal line 34)	55,596,890	16	53,348,524
17	Accounts payable and accrued expenses	436,125		661,609
18	Grants payable	26,213,691	18	23,713,780
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22				- <u>-</u>
	trustees, key employees, highest compensated employees, and			
ŀ	dismusified namena Complete Part II of Calcadida I		22	
23	Coursed market upon and makes parable to supplied driving markets		23	
24	Unsecured notes and loans payable to unrelated third parties		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			
ľ	of Schedule D		25	914,814
26	Total liabilities. Add lines 17 through 25	26,649,816	26	25,290,203
	Organizations that follow SFAS 117 (ASC 958), check here ▶X and			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	11,659,675	27	10,789,306
28	Temporarily restricted net assets	17,287,399	28	17,269,015
29	· · · · · · · · · · · · · · · · · · ·	,,	29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and			
	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33		28,947,074	33	28,058,321
٠	Total liabilities and net assets/fund balances	55,596,890	34	53,348,524

Form **990** (2015)

<u>Form</u>	990 (2015) Charity Global Inc. 22-3936753				Pag	e 12
Pa	rt XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u> _			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,12		
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		,23		
3		. 3		<u>,11</u>		
4	Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	28	<u>, 94</u>		
5	Net unrealized gains (losses) on investments	. 5		<u>-13</u>	2,3	<u> 358</u>
6	Donated services and use of facilities	. 6	_	_		
7	Investment expenses	. 7				
8	Prior period adjustments	8_				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		<u>35</u>	i5,€	<u>510</u>
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	, 05	8,3	<u> 321</u>
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			Į		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			Ì		
	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			Į		
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	•		-		
	separate basis, consolidated basis, or both:		- 1			
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in	•••••				
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			J		
	the Single Audit Act and OMB Circular A-133?			3a		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		
	Together the second of the sec			Form	990	(2015)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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

Open to Public Inspection

Internal Revenue Service Employer Identification number Name of the organization Charity Global Inc. 22-3936753 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (v) Amount of monetary (i) Name of supported (ii) EIN (iv) Is the organization (vi) Amount of (iii) Type of organization other support (see organization listed in your governing (described on lines 1-9 support (see instructions) above (see instructions)) document? instructions) (A) (B) (C) (D) (E)

Total

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.)

Sec	tion A. Public Support				· · · · · · · · · · · · · · · · · · ·		
Calen	dar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	27,062,961	32,979,756	36,260,866	43,690,259	35,127,416	175,121,258
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 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on	27,062,961	32,979,756	36,260,866	43,690,259	35,127,416	175,121,258
•	line 1 that exceeds 2% of the amount shown on line 11, column (f)						18,726,470
6 Sec	Public support. Subtract line 5 from line 4. tion B. Total Support	<u> </u>					156,394,788
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	27,062,961	32,979,756	36,260,866	43,690,259	35,127,416	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,798	38,910		399,207	i	
9	Net income from unrelated business activities, whether or not the business is regularly carried on			 			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	31,040	24,050	428,982	25,045	152,226	
11	Total support. Add lines 7 through 10	L				L	176,914,290
12	Gross receipts from related activities, etc	. (see instructions))			12	590,670
13	First five years. If the Form 990 is for the						. □
Sec	organization, check this box and stop he tion C. Computation of Public S		entage	 	····		· · · · · · · · · · · · · · · · · · ·
14	Public support percentage for 2015 (line			mn (f))		14	88.40 %
15	Public support percentage from 2014 Sch	nedule A. Part II. lii	ne 14	(//		15	87.11%
16a	33 1/3% support test—2015. If the orga	inization did not ch	eck the box on lin	e 13, and line 14	is 33 1/3% or mor		<u> </u>
	box and stop here. The organization qua	alifies as a publicly	supported organi	zation			> X
b	33 1/3% support test-2014. If the orga	inization did not ch	eck a box on line	13 or 16a, and lin	e 15 is 33 1/3% o	r more,	
	check this box and stop here. The organ	•		-			▶ 📙
17a	10%-facts-and-circumstances test—2						
	10% or more, and if the organization me				•	•	
	Part VI how the organization meets the "organization						> 🗆
b	10%-facts-and-circumstances test—2	_					
	15 is 10% or more, and if the organization				•		
	Explain in Part VI how the organization in			•	•	•	⊾ □
4 Q	supported organization	lid not check a have	on line 12 16c				
18	inetructions						•

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.)

5	tion A. Public Support	quality under	110 10313 11310	a belevi, picae	o complete i c		
		4 > 0044	1 11 2242	4 > 0045		() 0045	/D. TI
	dar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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						
8	Public support. (Subtract line 7c from]	
	line 6.)		<u> </u>		L		
	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶ 【	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smilar sources.						
Ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b				<u> </u>		
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.)						<u> </u>
14	First five years. If the Form 990 is for the	e organization's f	irst, second, third.	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop her	_	<u> </u>	<u></u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>	▶ 🗍
Sec	tion C. Computation of Public S	Support Perc	entage				
15	Public support percentage for 2015 (line 8			ımn (f))	.,	15	%
16_	Public support percentage from 2014 Sch				<u> </u>		%
Sec	tion D. Computation of Investm						
17	Investment income percentage for 2015 (13, column (f))		17	%
18	Investment income percentage from 2014	Schedule A, Pa	rt III, line 17			18	%
19a	33 1/3% support tests—2015. If the organization	anization did not	check the box on i			1/3%, and line	
	17 is not more than 33 1/3%, check this b	_	_				▶ 🗌
b	33 1/3% support tests—2014. If the organic						, ,
	line 18 is not more than 33 1/3%, check the		-				▶ 🏻
20	Private foundation. If the organization d	d not check a bo	x on line 14, 19a,	or 19b, check this	box and see inst	ructions	<u></u>

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on 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.)

Section A. All Supporting Organizati

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and ь satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
41.		
4b		
	į.	
4c		
5a		
5b 5c		
6		<u> </u>
7_		
8		
9a		
9b		
9c		
10a		
 10b 990 d	or 990-E	Z) 2015

		3936/53			Page 5
Pai	rt IV Supporting Organizations (continued)			- T	
44	Lies the assumption accounted a six or autilization from the first first first and the	Γ	+	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls either alone or together with persons described in (b) and (c)	. [ļ	
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11	اما		
ь	A family member of a person described in (a) above?	11	$\overline{}$		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11	$\overline{}$		
	ion B. Type I Supporting Organizations				
			\Box	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to				
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1	ł	ł	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		ı		
	controlled the organization's activities. If the organization had more than one supported organization,		1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported				
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<u> </u>	Ш		
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part				
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,				
	supervised, or controlled the supporting organization.		2		
Sect	ion C. Type II Supporting Organizations			, ¬	
4	184		+	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	j			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or management of the supporting organization was vested in the same persons that controlled or managed	1.	.		
Sect	the supported organization(s). ion D. All Type III Supporting Organizations		1		
<u> </u>	ion of the Type in Capperaing Organizations		1	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	[寸		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior to	ıx .	- 1		
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the				
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	\			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how				
	the organization maintained a close and continuous working relationship with the supported organization(s).		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a				
	significant voice in the organization's investment policies and in directing the use of the organization's				
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
	supported organizations played in this regard.		3		
	ion E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the integral Part Test during the year (se	e instructions)	:		
a	The organization satisfied the Activities Test. Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	414 .			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government en	uty (see instruct	ons)).	
2	Activities Test. Answer (a) and (b) below.		Γ	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	Г	一		
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	J			
	those supported organizations and explain how these activities directly furthered their exempt purposes,	Ì			
	how the organization was responsive to those supported organizations, and how the organization determined	1			
	that these activities constituted substantially all of its activities.	[2	a_		
b		Γ	T		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1			
	reasons for the organization's position that its supported organization(s) would have engaged in these				
	activities but for the organization's involvement.	<u> 2</u>	b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	1	-		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	İ			
	trustees of each of the supported organizations? Provide details in Part VI.		a		_
b					
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	13	b		

Schedule A (Form 990 or 990-EZ) 2015 Charity Global Inc.		<u>22-3936</u>	753 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organ	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov. 20,	1970. See instructions	. Ali
other Type III non-functionally integrated supporting organizations must complete Sec	ctions A	through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		<u> </u>
3 Other gross income (see instructions)	3		<u></u>
4 Add lines 1 through 3	4		<u> </u>
5 Depreciation and depletion	5		<u> </u>
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	i i		
maintenance of property held for production of income (see instructions)	6		<u> </u>
7 Other expenses (see instructions)	7		<u> </u>
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	T		
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
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		
6 Multiply line 5 by 035	6		
7 Recoveries 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 prior 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 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally-integr	rated Typ	e III supporting organiza	tion (see
instructions).			·

Sched	ule A (Form 990 or 990-EZ) 2015 Charity Global In		<u>22-3936</u>	753 Page 7
<u>Par</u>	t V Type III Non-Functionally Integrated 509(a)(3	Supporting Organ	izations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses		
2	Amounts paid to perform activity that directly furthers exempt purpose	es of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6		110 2010	74
<u> </u>	Underdistributions, if any, for years prior to 2015	 	 	
-	(reasonable cause required-see instructions)			п
3	Excess distributions carryover, if any, to 2015:	 		
a		 		
	From 2013	 		
	From 2014	 		
	Total of lines 3a through e	 		
_	Applied to underdistributions of prior years	 		
	Applied to 2015 distributable amount		,	
<u>;</u>				
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	 		
4	Distributions for 2015 from Section	 		
•	D. line 7. \$			
a	Applied to underdistributions of prior years		 	
	Applied to 2015 distributable amount	 -		
	Remainder. Subtract lines 4a and 4b from 4.	 -		_ ,
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
•	and 4b from line 1 (if amount greater than zero, see		į	
	instructions).		ļ	
7	Excess distributions carryover to 2016. Add lines 3j	 		
•	and 4c.	1	<u> </u>]
	Breakdown of line 7:	 	 	
		 	 	
<u>a</u> b		 	 	
	Excess from 2013	 		
	Excess from 2014	 	 	
	Excess from 2015	 	 	
<u>е</u>	EXCESS HOTH ZU13	<u> </u>	<u> </u>	

Schedule A (Form 990 or 990-EZ) 2015

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part II, Line 10 - Other Income Detail
\$ 661,343

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Financial Statements**

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

► Attach to Form 990.

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

2015
Open to Public Inspection

Employer identification number

22-3936753 Charity Global Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 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" on 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 Preservation of a certified historic structure Protection of natural habitat 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 2a Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 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. Part III Complete if the organization answered "Yes" on 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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X

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

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:

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 Charity	Global Inc	3		3936753	Page 2
Part III Organizations Maintaini	ng Collections	of Art, Historica	I Treasures, or	Other Similar As	sets (continued)
3 Using the organization's acquisition, access collection items (check all that apply):					
a Public exhibition	αΠ	Loan or exchange p	rograms		
b Scholarly research	e H				
c Preservation for future generations	ب -				
4 Provide a description of the organization's	collections and expl	ain how they further t	he organization's exe	empt purpose in Part	
XIII.		منط امنین میاند است			
5 During the year, did the organization solid					☐ Yes ☐ No
Part IV Escrow and Custodial		s part of the organiza	nuon's conection?	<u></u> _	. 165 NO
Complete if the organizate 990, Part X, line 21.		es" on Form 990	Part IV, line 9, o	or reported an amo	ount on Form
1a Is the organization an agent, trustee, cust	todian or other interm	ediary for contribution	s or other assets no	t	
included on Form 990, Part X?					Yes No
b If "Yes," explain the arrangement in Part 2	XIII and complete the	following table:			
				 -	Amount
d Additions during the year				1d	
e Distributions during the year				. 1e	
f Ending balance				[1f]	
2a Did the organization include an amount of					Yes No
b If "Yes," explain the arrangement in Part	XIII. Check here if the	explanation has bee	n provided on Part X	<u>III</u>	<u> </u>
Part V Endowment Funds.	ion onewored "V		Part IV line 10		
Complete if the organizat				(d) Three years back	(e) Four years back
4. Designation of years belongs	(a) Current year	(b) Pnor year	(c) Two years back	(b) Three years back	(e) Four years back
1a Beginning of year balance		-	+		+
b Contributions			 		+
c Net investment earnings, gains, and	l	1			}
losses	<u> </u>	 	+		+
d Grants or scholarships e Other expenditures for facilities and		 			
			1		
f Administrative expenses				- 	
g End of year balance			 		
2 Provide the estimated percentage of the	current year end hala	nce (line 1a column	(a)) held as		
a Board designated or quasi-endowment	-	rice (iii)e 19, column	(a)) Hold do.		
b Permanent endowment ▶					
c Temporarily restricted endowment ▶					
The percentages on lines 2a, 2b, and 2c					
3a Are there endowment funds not in the po	·	nization that are held	and administered for	the	
organization by:					Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If "Yes" on line 3a(ii), are the related orga	inizations listed as re	guired on Schedule F	?		3b
4 Describe in Part XIII the intended uses of					
Part VI Land, Buildings, and E		" F 000	Dest IV/ line 444	- Con Form 000	Dort V. line 40
Complete if the organizat					(d) Book value
Description of property	(a) Cost or othe (investmen	' '	r other basis (ther)	(c) Accumulated depreciation	(a) book value
1a Land	_	· · · · · · · · · · · · · · · · · · ·	,		
1a Land b Buildings	.				
c Leasehold improvements		- 1 2	112,865	164,777	1,248,088
d Equipment	}		207,500	660,127	1,547,373
e Other	-	—— —~/			,_,,,,,,,,
Total. Add lines 1a through 1e. (Column (d) mu	ust equal Form 990.	Part X. column (B). lin	e 10c.)		2.795.461

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

914,814

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

(7) (8) _(9)

Part XI Reconciliation of Revenue per Audited Financial Staten		<u> 22-393675</u>		Page 4
			Retu	ım.
Complete if the organization answered "Yes" on Form 990,	Paπ IV,	iine 12a.	- 1	25 616 026
Total revenue, gains, and other support per audited financial statements			1	35,616,826
Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	120 250		
a Net unrealized gains (losses) on investments	2a	-132,358		
b Donated services and use of facilities	2b	251,517		
c Recovenes of pnor year grants	2c			
d Other (Describe in Part XIII.)	2d			110 150
e Add lines 2a through 2d			2e	119,159
Subtract line 2e from line 1	ı ı		3	<u>35,497,667</u>
Amounts included on Form 990, Part VIII, line 12, but not on line 1:		74 001		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	74,821		
b Other (Describe in Part XIII.)	4b	-444,746		060 005
c Add lines 4a and 4b			4c	-369,925
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	35,127,742
Part XII Reconciliation of Expenses per Audited Financial State			er R	eturn.
Complete if the organization answered "Yes" on Form 990,	Part IV	line 12a.		26 505 570
Total expenses and losses per audited financial statements	• • • •		1	36,505,579
Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	051 517		
a Donated services and use of facilities	2a	251,517	i	
b Prior year adjustments	2b			
C Other losses	2c	00 126		
d · Other (Describe ın Part XIII.)	2d	89,136		240 652
e Add lines 2a through 2d			2e	340,653
Subtract line 2e from line 1	1 . 1		3	36,164,926
Amounts included on Form 990, Part IX, line 25, but not on line 1:		74 001		
a Investment expenses not included on Form 990, Part VIII, line 7b		74,821		
b Other (Describe in Part XIII.)	4b			74 001
c Add lines 4a and 4b			4c	74,821
Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u></u>		5	36,239,747
Part XIII Supplemental Information.		101 5 417 5 4	D - 4 \	V P
		o and 2b, Paπ V, line 4	, Paπ.	X, line
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I				
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide				
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	e any add			
povide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote	e any add	tional information.		
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote	e any add	tional information.		
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of incomments.	e any add	tional information tax positio	 ns _.	only if thos
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of incomments.	e any add	tional information tax positio	 ns _.	only if thos
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of incomplete the series of incompl	e any add	tional information. tax positions tained. Inc	ns come	only if thos
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of incomplete the series of incompl	e any add	tional information. tax positions tained. Inc	ns come	only if thos
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water	e any add	tax positions ta	ns come	only if thos generated is subject t
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water	e any add	tax positions ta	ns come	only if thos generated is subject t
Part XI, lines 2d and 4b; and Part XII, lines 3, 5, and 9; Part III, lines 1a and 4; Part IIP Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51	come g sus	tax positions tax positions tained. Incomment purpositions arity: wate	ns come se r d	only if those generated is subject the lides and the lides are the lides
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote charity: water recognizes the effect of incompositions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51	come g sus	tax positions tax positions tained. Incomment purpositions arity: wate	ns come se r d	only if thos generated is subject t
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51 recognize any unrelated business income tax	come g sus r's e 1. ch	tax positions ta	ns come se r d	only if thos generated is subject t
wide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51 recognize any unrelated business income tax	come g sus r's e 1. ch	tax positions ta	ns come se r d	only if those generated is subject the lides of the lides
Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51 recognize any unrelated business income tax	come g sus r's e 1. ch	tax positions ta	ns come se r d	only if those generated is subject the lides of the lides
wide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51 recognize any unrelated business income tax December 31, 2015 and 2014.	come g sus r's e 1. ch	tax positions ta	ns come se r d	only if those generated is subject the lid not years ended
wide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51 recognize any unrelated business income tax December 31, 2015 and 2014.	come g sus r's e	tax positions ta	ns come se r d	only if those generated is subject to did not expers ended
Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part XII, lines 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water tax under Internal Revenue Code Section 51 recognize any unrelated business income tax December 31, 2015 and 2014.	come g sus r's e	tax positions ta	ns come se r d	only if those generated is subject to did not expers ended
Part XI, Line 4b - Revenue Amounts Included Part XI, Line 4b - Revenue Amounts Included Part XI, Line 4b - Revenue Amounts Included	come g sus r's e 1. ch k lia	tax positions ta	ns come se r d the	only if those generated is subject the lid not a years ended
wide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water ax under Internal Revenue Code Section 51 recognize any unrelated business income tax December 31, 2015 and 2014. Part XI, Line 4b - Revenue Amounts Included	come g sus r's e 1. ch k lia	tax positions ta	ns come se r d the	only if those generated is subject the lid not a years ended
wide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X. Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being activities unrelated to charity: water ax under Internal Revenue Code Section 51 recognize any unrelated business income tax december 31, 2015 and 2014. Part XI, Line 4b - Revenue Amounts Include Rear-end gala revenue-related expenses	come g sus r's e 1. ch k lia	tax positions ta	ns come se r d the	only if those generated is subject to did not years ended
wide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide Part X, Line 2 - FIN 48 Footnote Charity: water recognizes the effect of inconsitions are more likely than not of being from activities unrelated to charity: water cax under Internal Revenue Code Section 51 recognize any unrelated business income tax December 31, 2015 and 2014.	come g sus r's e 1. ch k lia	tax positions ta	ns come se r d the	only if those generated is subject to did not years ended

Schedule D (Form 990) 2015 Charity Global Inc. Part XIII Supplemental Information (continued)	22-3936753	Page 5
Grant Adjustments from prior year awards		-355,610
Year-end gala revenue-related expenses	\$	444,746

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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

2015 Open to Public Inspection

OMB No 1545-0047

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

For	m 990, Part IV, line	14b.					
1 For grantma	kers. Does the organi	zation maintain record	ds to subs	stantiate the amount of its	grants and	other	
				d the selection criteria used			
grants or assi	istance?						X Yes No
					• • • • • •		
-			procedure	es for monitoring the use of	f its grants	and other	
assistance ou	tside the United State	! S.					
3 Activities per l	Region. (The following	Part I, line 3 table ca	an be dup	olicated if additional space i	s needed.)	
(a) Region	(b) Number of	(c) Number of		Activities conducted in		activity listed in (d) is	(f) Total
	offices in the region	employees, agents, and	fundr	region (by type) (e.g., raising, program services,		program service, cribe specific type of	expenditures for and investments
		independent contractors	1	investments,		ervice(s) in region	in region
		in region		grants to recipients located in the region)			
East Asia	and the Paci	fic					
(1)			Pgrm	funding-grants	Water	Programs	1,700,000
South Asia							
(2)			Pgrm	funding-grants	Water	Programs	4,740,869
Sub-Sahara	n Africa						-
(3)			Pgrm	funding-grants	Water	Programs	19,692,024
South Asia							
_(4)			Remot	e Monitoring	Water	Programs	174
Sub-Sahara	n Africa						-
(5)			Remot	e Monitoring	Water	Programs	41,889
Sub-Sahara	n Africa						
(6)			Repai	r & Maintenance	Water	Programs	51,420
South Asia							
(7)			Repai	r & Maintenance	Water	Programs	2,589
Sub-Sahara	n Africa					_	
(8)		2	Progr	am Services	Water	Programs	64,481
Europe				· ·			
(9)] 1	Busin	ess Consultant			44,272
			1				
(10)							
(11)	L						
(12)							
(13)							
•							
(14)							
							·
(15)							
•							
(16)							
<u> </u>			1				
(17)		,		İ			
3a Sub-total		3	i				26,337,718
b Total from continuation		_			•		1
sheets to Part I							
c Totals (add							<u> </u>
lines On and Oh)		ء ا	.1				26 227 710

ō	(f) Method of valuation (book, FMV, appraisel, other)																									
answered "Yes I.	(h) Description of non-cash assistance																									
Complete if the organization answered "Yes" if additional space is needed.	(g) Amount of non-cash assistance	sfer	sfer	sfer	sfer		sfer	sfer		sfer	sfer		sfer		sfer		sfer	sfer		sfer		sfer		sfer	4	sier
	(1) Manner of cash disbursement	Wire Tran	Wire Transfer	Wire Transfer	Wire Transfer		Wire Transfer	Wire Transfer		Wire Transfer	Wire Transfer	i	Wire Transfer		Wire Transfer	- 1	Wire Transfer	Wire Transfer		Wire Transfer	- 1	Wire Transfer		Wire Transfer	1	Wire Transier
tside the United States. Complete if the organization Part II can be duplicated if additional space is needed	(e) Amount of cash grant	1,700,000	1,748,706	490,950	203,146		1,367,160	580,907		350,000	3,661,186		3,565,341		39,884		182,922	9,740,453		088'666		175,000		42,022	700	105,336
s or Entities Ou		Pgrm funding-grants and the Pacific	Pgrn	Pgrm funding-grants	Pqrm funding-grants		Pgrm funding-grants	Pgrm funding-grants		Pgrm funding-grants	Pgrm funding-grants	an Africa	Pgrm funding-grants	an Africa	Pgrm funding-grants	41	Pgrm funding-grants an Africa	Pgrm funding-grants	ͺH	Pgrm funding-grants	H	Pgrm funding-grants	Ä			Pgrm funding-grants an Africa
nce to Organipient who rece	(c) Region	East Asia	A + tro	1	South Asia	South Asia	South Asia	١.	South Asia	South Asia		Sub-Saharan Af		Sub-Saharan Af	1.0	Sub-Sanaran At	Sub-Saharan Af		Sub-Saharan Af		Sub-Saharan Af		Sub-Saharan Af	1 1 1	SWD-Sanaran	F Sub-Saharan
Grants and Other Assistance to Organization Part IV. Ine 15, for any recipient who received m	(b) IRS code section and EIN (if applicable)																									
Grants and Part IV. line	(a) Name of organization																									
Part II Grants and Part IV. Inc	-	Ξ	5	(5)	9	4	9		9			<u>@</u>		6		19	£		(12)		(13)		(14)		3	(16)

2 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

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2015

Page 2

22-3936753

Schedule F (Form 990) 2015 Charity Global Inc.

Part II		Grants and Other Assistance to Organization Part IV, line 15, for any recipient who received m	ince to Organipient who reco	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	the United State	s. Complete i	f the organization space is needec	answered "Yes" 1.	on Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)
£			Sub-Sahar	Pgrm funding-grants Sub-Saharan Africa	1,000,000	Wire Transfer	sfer		
(2)			Sub-Sahar	Pgrm funding-grants Sub-Saharan Africa	180,000	Wire Tran	Transfer		
(3)									
4									
(2)								-	
(9)									
6									
(8)									
6)									
(10)								:	
(1)									
(12)									
(13)									į
(4 <u>1</u>									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as chanties 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

3 Enter total number of other organizations or entitles

Schedule F (Form 990) 2015

(f) Amount of (g) Description (valuation or valuation valuation (g) Description (book, FIM, essistance of non-cash assistance of non-cash	orrer)																
(e) Manner of cash cash grant of disbursement					į		:										
(c) Number of recipents				_													
(b) Region																	
(a) Type of grant or assistance (b) Region (c) Number of requests	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)

<u>Sche</u>	edule F (Form 990) 2015 Charity Global Inc.	22-3936753			Page 4
Pa	art IV Foreign Forms				
1	Was the organization a U.S. transferor of property to a foreign corporation dur	and the tax year? If "Yes."			
•	the organization may be required to file Form 926, Return by a U.S. Transfero	•			
				Yes	X No
	Corporation (see Instructions for Form 926)		. Ц	165	Z NO
2	Did the organization have an interest in a foreign trust during the tax year? If	"Yes," the organization			
	may be required to separately file Form 3520, Annual Return To Report Trans	sactions With Foreign			
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Info	· ·			
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not			Yes	X No
	11dd 11dd 0.0. 011dd (300 11dd 000) 10 1 01110 0020 0110 002074, 00 110		. Ш	1	110
3	Did the organization have an ownership interest in a foreign corporation during	g the tax year? If "Yes,"			
	the organization may be required to file Form 5471, Information Return of U.S	6. Persons With Respect to			
	Certain Foreign Corporations (see Instructions for Form 5471)	-		Yes	X No
	7		. —	<u> </u>	_
4	Was the organization a direct or indirect shareholder of a passive foreign inve	stment company or a			
	qualified electing fund during the tax year? If "Yes," the organization may be n	equired to file Form 8621,			
	Information Return by a Shareholder of a Passive Foreign Investment Compa	inv or Qualified Electing			
	Fund (see Instructions for Form 8621)	,		Yes	X No
	,		Ш		
5	Did the organization have an ownership interest in a foreign partnership during	g the tax year? If "Yes,"			
	the organization may be required to file Form 8865, Return of U.S. Persons V	Vith Respect to Certain			
	Foreign Partnerships (see Instructions for Form 8865)	·		Yes	X No
	· · · · · · · · · · · · · · · · · · ·		Ш	<u>.</u> 1	
6	Did the organization have any operations in or related to any boycotting count	ries during the tax year? If			
	"Yes," the organization may be required to separately file Form 5713, Internat	ional Boycott Report (see			
	Instructions for Form 5713, do not file with Form 990)			Yes	X No
				•	_

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).

information (see instructions).	
Part I, Line 3 - Activities per Region	
Region	Expenditures Investments
East Asia and the Pacific	\$ 1,700,000 \$ 0
South Asia	\$ 4,740,869 \$ 0
Sub-Saharan Africa	\$ 19,692,024 \$ 0
South Asia	\$ 174 \$ 0
Sub-Saharan Africa	\$ 41,889 \$ 0
Sub-Saharan Africa	\$ 51,420 \$ 0
South Asia	\$ 2,589 \$ 0
Sub-Saharan Africa	\$ 64,481 \$ 0
Europe	\$ 44,272 \$0
Part V - Additional Information	
Part I, Line 2 - Procedures for Monitoring	g the Use of Grant Funds
charity: water's procedures for monitoring	g program funding begin with
program selection.	
Prior to entering into any agreement(s) t	o 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 ev	idence to support and demonstrate
industry best practices in the area of fi	duciary due diligence.
This process includes, but is not limited	to reviewing:
-Local registration and employment contra	cts
-Independent audit reports	

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).

-Fiscal oversight, record-keeping and internal controls
-Procurement, contracting and cash management policy and procedures
-Program accounting and reporting systems
Pand on the mitaria communication of the contraction
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 partner deliverables, outputs, and
relevant cost and impact metrics. All funds necessary to fulfill each grant
are raised prior to signing the grant. charity: water sends disbursements
to partners in tranches once key milestones in project completion are met.
Given this granting methodology, grants payable have little risk as they
are fully supported by programmatic assets - cash on hand restricted for
this use.
Key milestones include:
-Establishment of a legally-binding agreement to produce intended program
deliverables within an agreed-upon timeframe
-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

Schedule F (Form 990) 2015 Charity	GIODAI	Inc
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Page 5

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).
post-i	mplementation, and some are selected for independently-contracted
financ	cial audits to ensure that costs incurred and claimed have been
proper	rly reported and reasonably stated in compliance with the terms of the
agreen	ment(s).
Includ	ded in South Asia Program funding grants is \$946,586 raised for
	efforts in Nepal following a 7.8 magnitude earthquake in April 2015.
Relief	efforts included water, shelter, sanitation, hygiene and rebuilding
and re	ehabilitation for 120,393 people.

SCHEDULE G (Form 990 or 990-EZ

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization enswered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047 2015

Department of the Treasury

Attach to Form 990 or Form 990-EZ.

Open to Public

e of the organization Charity Global In						Employer identification 22-39367	
Fundraising Activities. Complete	if the organiza			rered "Yes" on Fo	orm		
Form 990-EZ filers are not required					_		
Indicate whether the organization raised funds through	Ĺ.	•			' .		
a Mail solicitations			-	ernment grants			
b Internet and email solicitations		_		nent grants			
C Phone solicitations	g Special fu	ndraisin	g ev	ents			
d In-person solicitations							
a Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or enti	ty in connection w	al (Includ ith profe	aing essio	onicers, directors, tru nal fundraising servic	stee: es?	s	Yes I
b If "Yes," list the ten highest paid individuals or entities	(fundraisers) purs	uant to	agre	ements under which	the 1	fundraiser is to be	•
compensated at least \$5,000 by the organization.	T	(iii) Did raiser l		 	Γ	(v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custod	y or i of	(iv) Gross receipts from activity		(or retained by) fundraiser listed in col (l)	(or retained by) organization
		Yes	No			-	
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al			▶				
List all states in which the organization is registered o registration or licensing.	r licensed to solici	contrib	ution	s or has been notifie	d it i	s exempt from	
- 							

	edui art	II Fundraising E than \$15,000 o	2015 Charity Glo Events. Complete if the orgof fundraising event contribution greater than \$5,000.	anization answered "Yes"	on Form 990, Part IV, I	36753 Page 2 ine 18, or reported mor and 6b. List events wi
9	-	<u>gross 1000,pto</u>	(a) Event #1 Year-End Gala (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	2,262,310			2,262,310
		Less. Contributions . Gross income (line 1 minus	2,212,585		-	2,212,585
		line 2)	49,725			49,725
	4	Cash prizes		<u> </u>		
	5	Noncash prizes	3,825			3,825
enses	6	Rent/facility costs	123,920			123,920
Direct Expenses	7	Food and beverages	161,263			161,263
	8	Entertainment				
	9	Other direct expenses	155,738			155,738
Pi	10 <u>11</u> art	Net income summary. Su	. Add lines 4 through 9 in column <u>ibtract line 10 from line 3, column</u> iplete if the organization an	(d)	<u></u> ,,,	444,746 -395,021
Revenue		than \$15,000 o	on Form 990-EZ, line 6a.	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
ş	1	Gross revenue				
Ses	2	Cash prizes	-			
Expenses	3	Noncash prizes				
	4					ì
- 1		Rent/facility costs .		<u> </u>	_	
_		Rent/facility costs Other direct expenses				
	5		Yes %	Yes %	Yes %	
	<u>5</u>	Other direct expenses Volunteer labor		No No		
	5 6 7	Other direct expenses Volunteer labor Direct expense summary.	No	(d)	No P	
9 a	5 6 7 8 Ent	Other direct expenses Volunteer labor Direct expense summary. Net gaming income summary. ter the state(s) in which the	No Add lines 2 through 5 in column	No (d) column (d)	No P	···· Yes No
9 a	5 6 7 8 Ent	Other direct expenses Volunteer labor Direct expense summary. Net gaming income summary. ter the state(s) in which the organization licensed to	No Add lines 2 through 5 in column mary. Subtract line 7 from line 1, column e organization conducts gaming a	No (d) column (d)		Yes No
9 a b	5 6 7 8 Ent Is ti If "I	Other direct expenses Volunteer labor Direct expense summary. Net gaming income summary. ter the state(s) in which the organization licensed to No," explain:	No Add lines 2 through 5 in column mary. Subtract line 7 from line 1, column e organization conducts gaming a	No (d) column (d)	No	Yes No

Sche	edule G (Form 990 or 990-EZ) 2015	Charity	Global	Inc.		22-39367	53	Page 3
11	Does the organization conduct gaming						\Box	Yes No
12	Is the organization a grantor, beneficia							_
	formed to administer charitable gamin							Yes No
13	Indicate the percentage of gaming act							
а	The organization's facility					13a	.1	%
b						401		/4
14	Enter the name and address of the pe	who proper	e the omaniza		ning/enegial events hooks and	<u>L.10k</u>	<u>'</u>	
14	records:	sison who prepare	es the Organiza	iuon s gan	mingspecial events books and			
	Name ▶							
	Address ▶							
15a	Does the organization have a contract	with a third party	from whom th	e organiza	ation receives gaming			
	•	• •		-				Yes No
ь	If "Yes," enter the amount of gaming r	evenue received	 by the omaniza	ation > \$	and	the	ш	
-	amount of gaming revenue retained by	the third party	• \$, doi:		2.0		
c	If "Yes," enter name and address of the		Ψ		• •••			
•	ii res, enter hame and address of the	e unu party.						
	Name ▶							
		••• • • • • • • • • • • • • • • • • • •				• • • • • • • • • • • • • • • • • • • •	• • • • •	
	Address ▶							
	Address						• •	
16	Gaming manager information:							
	Name &							
	Name ▶							
	Gaming manager compensation ▶ \$							
	Decounties of continue provided							
	Description of services provided ▶	• • • • • •						
	□ Dimenter/officer □ □ □	_1	—	_4	-4			
	Director/officer Em	ployee	Independe	ent contra	ctor			
47	A. I.A. 1249 a							
17	Mandatory distributions:							
а	Is the organization required under stat	e law to make ch	ıaritable distribu	itions fron	n the gaming proceeds to			🗖
	retain the state gaming license?							Yes No
b	Enter the amount of distributions requi	red under state la	aw to be distrib	uted to ot	her exempt organizations or			
	spent in the organization's own exemp							
Par	rt IV Supplemental Inform	ation. Provide	the explan	ations re	equired by Part I, line 2b,	columns (iii) a	nd (v);	and
		o, 15b, 15c, 16	6, and 17b,	as appli	icable. Also provide any a	dditional inforr	nation	(see
	instructions).				_ <u></u>			
•							•	•••
•							• • • • •	••• •• ••
•					• • • • • • • • • • • • • • • • • • • •	•• ••••		
•						••• •		
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• •				• • • • •	• • • • • • • • • • • • • • • • • • • •			
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SCHEDULE J (Form 990)

D-4 I

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization Charity Global Inc.

Employer identification number 22-3936753

<u></u>	art i Questions Regarding Compensation				
			Y	es	No
1a	a Check the appropriate box(es) if the organization provided any of the following	owing to or for a person listed on Form		- 1	
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevan	nt information regarding these items.			
	First-class or charter travel Housin	g allowance or residence for personal use			
	Travel for companions Payme	nts for business use of personal residence	1	1	
	Tax indemnification and gross-up payments Health	or social club dues or initiation fees		- 1	
	Discretionary spending account Person	al services (e.g., maid, chauffeur, chef)		- [
			l		
b	If any of the boxes on line 1a are checked, did the organization follow a	written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If				
	explain	1	. l	ł	
			\top		
2	Did the organization require substantiation prior to reimbursing or allowing	g expenses incurred by all	1	-	
_	directors, trustees, and officers, including the CEO/Executive Director, re				
		garding the norms discoved in line			
	1a?	······· ··· · · · · · · · · · · · · ·	+	\dashv	
2	Indicate which if any of the following the filing emenization used to act	blish the componentian of the		- 1	
3	Indicate which, if any, of the following the filing organization used to esta	· · · · · · · · · · · · · · · · · · ·	ł	ĺ	
	organization's CEO/Executive Director. Check all that apply. Do not chec	·	- (Ų	
	related organization to establish compensation of the CEO/Executive Dir	·			
		employment contract		-	
		nsation survey or study		- 1	
	X Form 990 of other organizations X Approv	al by the board or compensation committee	-	- 1	
			ı		
4	During the year, did any person listed on Form 990, Part VII, Section A,	ine 1a, with respect to the filing			
	organization or a related organization:			J	
а	Receive a severance payment or change-of-control payment?		a 📗	I	<u> </u>
þ	Participate in, or receive payment from, a supplemental nonqualified reti		5 T		X
c	Participate in, or receive payment from, an equity-based compensation				$\overline{\mathbf{x}}$
	if "Yes" to any of lines 4a-c, list the persons and provide the applicable			T	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations mus	t complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organ	-		I	
,	compensation contingent on the revenues of:	nization pay or accide any	1	- {	
_		ء ا	.	1	v
	The organization?			\dashv	$\frac{\mathbf{x}}{\mathbf{x}}$
P			<u> </u>		
	If "Yes" to line 5a or 5b, describe in Part III.		1	ì	
_			-1	ļ	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the orga	nization pay or accrue any			
	compensation contingent on the net earnings of:	\	ļ	ļ	
	The organization?		a	_	<u> </u>
b	Any related organization?		b	_	X
	If "Yes" on line 6a or 6b, describe in Part III.				
			1	- }	
7					
	payments not described on lines 5 and 6? If "Yes," describe in Part III				X
8	Were any amounts reported on Form 990, Part VII, paid or accrued purs	uant to a contract that was subject			
-	to the initial contract exception described in Regulations section 53.4958		1		
	in Bort III	•	, [X
			1	\dashv	 -
9	If "Yes" to line 8, did the organization also follow the rebuttable presump	tion procedure described in			
9	D 1 1 1 1 50 1050 01 10	l ,	. 1		
_	Regulations section 53.4958-6(c)?				

478586 11/07/2016 5 00 PM

22-3936753 Charity Global Inc. Schedule J (Form 990) 2015

Page 2 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(B) Bre		(B) Breakdown of W-2 and/or 1099-MISC compensation (c) Retirement and (d) Nortexable (E) Total of columns (F)	SC compensation	(C) Retrement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(I) Base compensation	(II) Bonus & incertive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)+(D)	in column (B) reported as deferred on prior Form 990
son	(1) 247,722		240	8,759	6,671	263,392	0
1 Founder/CEO (#)		0	0	0	0	0	
	247,45	0:	252	10,450	25,222	283,382	• · · · · · · · · · · · · · · · · · · ·
2 Chief Water Officer (0)			0	0	0	0	
Тe	(1) 135,629		126	5,025	20,791	161,571	0
3 VP of Finance (II)		0	0	0	0	0	0
	010,671 (0)	0	168	6,657	22,630	208,465	o :
4 VP of Engineering (III)			0	0	0		0
	(I) 154,290	0	106	0	7,395	161,791	0
s VP of Key Relations (III)		0	0	0	0	0	0
itta	(1) 136,361	0	4.4	5,570	8,880	150,888	0
e Chief of Staff (II)		0	o	0	0	0	0
0)							
7	n)						
(II) 8	, la						
	0	:				:	
5	=1:						
	<u> </u>		•				
11		•					
	(0)	•	•				
(0)							
74							
(i) (ii)	(n)		•				
	(a)						
						Sch	Schedule J (Form 990) 2016

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Schedule J (Form 990) 2015 Charity Global Inc.
Part III Supplemental Information

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

22-3936753

:

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.

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.

OMB No 1545-0047

Open To Public Inspection

Name of the organ	ization							Emplo	yer ide	ntificati	on nu	mber		
	Charity Global Inc.								9367	53				
Part I	Excess Benefit Transaction Complete if the organization answere									40h				
	Complete ii tile organization answere		nship between disqu				FOIII 930	-EZ, Fait	v, <u>iirie</u>	400.		(4)	Correct	ted?
1	(a) Name of disqualified person	(2) (10,000	organization				(c) De	scription of tr	ansactio	n		Yes	$\overline{}$	No
<u>(1)</u>		1												
(2)													\perp	
(3)												ļ	\perp	
(4)				_								<u> </u>	\bot	
(5)												 -	+	
(6)				-4-		no di una di			_			<u> </u>	—	
under se	e amount of tax incurred by the organization 4958								▶ \$					
Part II	Loans to and/or From Inter	ested Pers	sons.											
	Complete if the organization answere	d "Yes" on Fo	orm 990-E Z , Pa	art V	, line	38a or Form	n 990, Par	t IV, line 2	:6, or r	f the				
	organization reported an amount on i					(100-1	- 1 45 5		1/ - \ l-		10 x A.		<u> </u>	(I-44
	(a) Name of interested person	(b) Relationship with organization			oen to om the				(g) In	oelalut?	bybo	oproved pend or		Vritten ment?
				$\overline{}$	<u>u?</u>			1		No	Yes	nttee?	Yes	No
				10	From				Yes	NO	163	I No	162	100
(1)				1	igspace		_		-				<u> </u>	<u> </u>
(2)	_ _		_		<u> </u>				<u> </u>				_	_
(3)														
(4)														
<u>(5)</u>				T	┢				†		-			_
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_(7)				╁	╁				+-	-		-	-	-
(8)				╀	\vdash	<u> </u>			+-			<u> </u>	_	
(9)				_	-				-		}_	-	\vdash	ļ
<u>(1</u> 0)			ļ		1					ì	i			
Total							\$		1		1			
Part III	Grants or Assistance Bene Complete if the organization answere						· -	-						
	(a) Name of interested person	(b) Relation	ship between intere	ested	$\overline{}$	mount of assistar	os (d) Typ	e of assistano	•	(e)	Purpos	e of as	sistance	,
				_	T		 		+				—	
(2)									_1					
_(3)														
(4)					ــــــــــــــــــــــــــــــــــــــ		 		4.					
(5)					\vdash		 							
(6)					\vdash		+							
<u>(7)</u>					\vdash		+-		\dashv					
(8) (9)					+		+				_			
		-			-		+		-+					

nedule L (Form 990 or 990-EZ) 2015	Charity Global Inc.		22-3936753	Page
art IV Business Transaction	ons Involving Interested Persons			
Complete if the organizatio	n answered "Yes" on Form 990, Part IV, line	28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction	(e) Shan
	interested person and the	transaction		of org.
	organization			Yes N
Viktoria Harrison	Spouse- S.H.	82,439	COMPENSATION	
Lauren Letta	Spouse- M.L.		COMPENSATION	7
		 		
		 		_
	_ 	 		+
		 		_+
		 		\dashv
		 		+-+
		 	 	- - -
		 		
		J	L	
rt V Supplemental Infor				
Provide additional informat	on for responses to questions on Schedule	L (see instructions).		
	211111 2 2 6	•		
chedule L, Part V	- Additional Informat	<u> </u>		
cott Harrison (Fou	nder/CEO) and Viktori	a Harrison	(VP of Creative) have
<u>family relationsh</u>	<u></u>			
Michael Letta (form	er CFO) and Lauren Le	tta (Chief	of Staff) have	a fam
elationship.				
LETACIONALIP.				
		<u> </u>		_
	. <u> </u>			
				
				
				
				
				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public Inspection

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.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

Charity Global Inc. 22-3936753 Part I Types of Property (c) (d) (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art --- Works of art Art — Historical treasures . . . 2 3 Art — Fractional interests Books and publications . . 5 Clothing and household goods 6 Cars and other vehicles Boats and planes 7 Intellectual property ... X 27 394,061 FMV at time of sale 9 Securities — Publicly traded 10 Securities - Closely held stock Securities — Partnership, LLC, or trust interests Securities — Miscellaneous ... 12 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution -- Other 15 Real estate — Residential Real estate -- Commercial 16 17 Real estate --- Other 18 Collectibles Food inventory . . . 19 Drugs and medical supplies . . 20 21 22 Scientific specimens 23 24 Archeological artifacts Other > (Supplies/Equip) <u>39</u> 243,660 Donor Stated **FMV** 25 Other > (Special Events) 3,825 26 Donor Stated **FMV** 27 Other ▶(28 Other ▶(29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 0 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? X 30a b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard 31 X contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32<u>a</u> contributions? If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (For		Chari	ty Globa	al Inc.			22-393	6753	Page 2
Part II	the`orga	anization is	reporting in	Part I, colu	mn (b), the	number of		30b, 32b, and 3 , the number of n.	3, and whether items received,
Sched	ule M	- Sunn	lemental	Inform	ation		-	· -	
							•••		
chari	ty: wa	ter is	reporti	ng the	umper.	of cont	ribution	ns receive	d in column
(p) o	f Sche	dule M	, Part I	.• .					
	••••				•••			. ,	
• • • • • • • • • • • • • • • • • • • •									
					· · · · · · · ·				
	••••								

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.

OMB No 1545-0047 2015

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form99d. Inspection Name of the organization Employer identification number 22-3936753 Charity Global Inc. Form 990 - Organization's Mission Part I, Line 1 and Part III, Line 1 charity: water is a non-profit organization bringing clean and safe drinking water to people in developing nations. charity: water inspires giving and empowers others to fundraise for sustainable water solutions. A separate, private group of supporters funds operational costs, allowing charity: water to use 100% of public donations to fund water projects. Donations are sent to our local partners, who build and implement the water projects. When the water projects are completed, we prove every one of them using GPS coordinates, photos and information about the community served. Form 990, Part III, Line 4b - Second Accomplishment Additionally, in April 2015 Nepal experienced a 7.8 magnitude earthquake. charity: water raised \$946,586, 100% of which funded immediate relief efforts in Nepal including water, shelter, sanitation, hygiene and rebuilding and rehabilitation for 120,393 people. Form 990, Part III, Line 4d - All Other Accomplishment With the fifth highest infant mortality and third highest birth rate in the world, Mali faces severe water access issues with its growing population. Ranking 179 out of 188 on the Human Development Index, Mali struggles to provide improved water sources to more than a third of its rural

Employer Identification number

22-3936753

population, and 84% 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 2015, charity: water funded 206 water projects to help 70,565 people in Mali access clean water.

.....

Ranking 163 of 188 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, approximately a quarter have access to improved sanitation and 24% 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 2015, charity: water funded 123 water projects in Uganda that can serve 57,891 people.

Cambodia is ranked 143 out of 188 on the Human Development Index. With a population of approximately 15.3 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 69% of families have access to an improved water source and 30% 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 2015, charity: water funded 866 water projects that can serve 159,660 people in Cambodia.

Name of the organization

Charity Global Inc.

Employer identification number

22-3936753

Malawi, a small landlocked country in Southern Africa with a population of 16.7 million people, ranked 173 out of 188 on the most recent Human. Development Index. 11% of rural Malawians lack access to an improved water source and 60% lack access to improved sanitation. As a result, water-related diseases (including dysentery, cholera, and typhoid) are a common problem and are exacerbated by the rapid spread of HIV/AIDS, as Malawi has one of the highest HIV/AIDS rates in the world at 10% of adults aged 15 to 49. In 2015, charity: water funded 80 water projects that can serve 23,252 people.

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 180 out of 188 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 51% and 21%, respectively. In 2015, charity: water funded 62 water projects in Mozambique that can serve 27,140 people.

Ranking 142 out of 188 on the Human Development Index, Bangladesh is the eighth most populous nation in the world, but is slightly smaller than Iowa, making it one of the most densely populated. Thirty-eight percent of the rural population lacks access to improved sanitation and 13% lack improved water sources. Almost one-third of the population lives below the poverty line and there is a high risk of infectious disease, particularly

Page 2 of 8

chedule O (Form 990 or 990-EZ) (2015) ame of the organization	Employer Identification number
Charity Global Inc.	22-3936753
waterborne disease. In 2015, charity: water funded 2	284 water projects that
can serve 65,841 people in Bangladesh.	
India is home to around a third of the world's poor	and nearly 30% of
children under age 5 are underweight. Ranking 130 ou	t of 188 on the Human
Development Index, India faces difficult barriers to	development including
population growth and unimproved access to sanitation	n for two-thirds of it
rural population. In particular, the states of Oriss	sa and Bihar are
characterized by extreme poverty and contain large p	populations of
historically disadvantaged groups, especially Schedu	le Caste and Tribe
members. Orissa and Bihar experience high rates of l	health problems related
to water and sanitation, water quality concerns, and	d exploitation of water
resources. Arsenic is another threat to water qualit	cy; in West Bengal, nine
arsenic-ridden districts make water unsafe for more	than 5 million people,
whose only water option is open ponds shared with 1	ivestock. In 2015,
charity: water funded 142 projects in these states t	that can serve 28,375
Form 990, Part VI, Line 2 - Related Party Information	on Among Officers
Michael Letta Lauren Letta	3
CFO (Ending 06/30/15) Chief of Sta	aff
Family Relationship	
Scott Harrison Viktoria Ha	rrison
Founder/CEO VP-Creative	
Family Relationship	
	Page 3 of 8

Name of the organization

Charity Global Inc.

Employer identification number

22-3936753

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, VP of Finance 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.

Page 4 of 8

Name of the organization Employer identification number 22-3936753 Charity Global Inc. 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 taxexempt 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) (2015)	Page 2
Name of the organization Charity Global Inc.	Employer Identification number 22-3936753
(1) advance approval by the independent board of dir	
independent compensation committee of the Organization	ion;
(2) use of appropriate comparability data; and	
(3) contemporaneous documentation.	
1. Advance Review - The Board or compensation commit	tee shall review and
approve compensation arrangements in advance, provid	led that persons with a
conflict of interest with respect to a given compens	sation arrangement do
not participate in the review or approval of such c	ompensation arrangement.
2. Comparability Data - To determine reasonable comp	pensation, the Board or
compensation committee shall obtain and rely on app	ropriate 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 geo	ographic area of the
Organization;	
(iii) current compensation surveys compiled by the	independent firms; and
(iv) actual written offers from similar organization	as competing for the
services of the person.	
3. Contemporaneous documentation - The Board or comp	pensation 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 commit	ttee who:
(a) were present during debate on the compensation	arrangement and
(b) voted on the compensation arrangement;	
(iii) the comparability data obtained and relied upo	n and how such data was

Page 8 of 8