

Form

990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Check if applicable:  
Address change  
Name change  
Initial return  
Final return/terminated  
Amended return  
Application pending

C Name of organization  
CHARITY GLOBAL INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)  
PO BOX 5026

Room/suite

City or town, state or province, country, and ZIP or foreign postal code  
HAGERSTOWN, MD 21741

F Name and address of principal officer:  
SCOTT HARRISON  
PO BOX 5026  
HAGERSTOWN, MD 21741

H(a) Is this a group return for subordinates?  
H(b) Are all subordinates included?  
If "No," attach a list. See instructions.  
H(c) Group exemption number

D Employer identification number  
22-3936753

E Telephone number  
(646) 688-2323

G Gross receipts \$ 131,727,019

I Tax-exempt status: 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527

J Website: WWW.CHARITYWATER.ORG

K Form of organization: Corporation Trust Association Other

L Year of formation: 2006

M State of legal domicile: NY

Part I

Summary

Activities & Governance

1

Briefly describe the organization's mission or most significant activities:  
TO BRING CLEAN AND SAFE WATER TO PEOPLE AROUND THE WORLD. SEE SCHEDULE O.

2

Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3

Number of voting members of the governing body (Part VI, line 1a)

3

11

4

Number of independent voting members of the governing body (Part VI, line 1b)

4

10

5

Total number of individuals employed in calendar year 2021 (Part V, line 2a)

5

103

6

Total number of volunteers (estimate if necessary)

6

15

7a

Total unrelated business revenue from Part VIII, column (C), line 12

7a

0

7b

Net unrelated business taxable income from Form 990-T, Part I, line 11

7b

0

Revenue

8

Contributions and grants (Part VIII, line 1h)

90,196,522

100,523,267

9

Program service revenue (Part VIII, line 2g)

0

0

10

Investment income (Part VIII, column (A), lines 3, 4, and 7d)

2,393,248

1,525,306

11

Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

268,945

-437,434

12

Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

92,858,715

101,611,139

Expenses

13

Grants and similar amounts paid (Part IX, column (A), lines 1–3)

41,978,035

78,530,167

14

Benefits paid to or for members (Part IX, column (A), line 4)

0

0

15

Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

10,450,649

11,087,904

16a

Professional fundraising fees (Part IX, column (A), line 11e)

0

0

b

Total fundraising expenses (Part IX, column (D), line 25)

9,806,518

17

Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

10,462,633

9,173,872

18

Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

62,891,317

98,791,943

19

Revenue less expenses. Subtract line 18 from line 12

29,967,398

2,819,196

Net Assets or Fund Balances

20

Total assets (Part X, line 16)

137,299,160

173,056,021

21

Total liabilities (Part X, line 26)

46,457,934

78,840,800

22

Net assets or fund balances. Subtract line 21 from line 20

90,841,226

94,215,221

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer  
SCOTT HARRISON CEO  
Type or print name and title

2022-11-02  
Date

Paid Preparer Use Only

Print/Type preparer's name  
Firm's name  
Firm's address

Preparer's signature  
KPMG LLP  
345 PARK AVENUE  
NEW YORK, NY 10154

Date  
2022-11-02

Check if self-employed

PTIN  
P02534927

Firm's EIN  
13-5565207

Phone no.  
(212) 758-9700

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2021)

Part III

Statement of Program Service Accomplishments

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

☐

1 Briefly describe the organization’s mission:

CHARITY: WATER IS A NON-PROFIT ORGANIZATION BRINGING CLEAN AND SAFE WATER TO PEOPLE AROUND THE WORLD.  
(CONTINUED ON SCHEDULE O).

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 15,796,361 including grants of \$ 15,134,618 ) (Revenue \$ )

UGANDA - UGANDA RANKED 159 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI, AND CONTINUES TO FACE DIFFICULTIES AND HIGH REFUGEE RATES AS A RESULT OF TWO DECADES OF CIVIL CONFLICTS IN NEIGHBORING SOUTH SUDAN, THE DEMOCRATIC REPUBLIC OF THE CONGO, AND BURUNDI. IN 2021, THERE WAS AN ESTIMATED 1.4 MILLION REFUGEES LIVING IN UGANDA. FOR RURAL UGANDANS, WHICH MAKE UP 75% OF THE TOTAL POPULATION, APPROXIMATELY 51.8% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 82.9% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. AS COMMUNITIES REBUILD AFTER YEARS OF DISPLACEMENT, CLEAN WATER PROJECTS HELP TO IMPROVE HEALTH AND QUALITY OF LIFE. IN 2021, CHARITY: WATER FUNDED 2,024 WATER PROJECTS THAT WILL SERVE 315,018 PEOPLE.

4b (Code: ) (Expenses \$ 9,300,000 including grants of \$ 9,300,000 ) (Revenue \$ )

RWANDA - WHILE RWANDA HAS MADE INCREDIBLE SOCIAL AND ECONOMIC PROGRESS IN THE PAST 25 YEARS SINCE THE HORRIFIC GENOCIDE, THE COUNTRY RANKED 160 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. 44.4% OF THOSE LIVING IN RURAL AREAS LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, AND 27.3% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 1,064 WATER PROJECTS THAT WILL SERVE 223,444 PEOPLE.

4c (Code: ) (Expenses \$ 5,123,200 including grants of \$ 4,900,000 ) (Revenue \$ )

MADAGASCAR - MADAGASCAR IS AN ISLAND OFF THE COAST OF EAST AFRICA, LOCATED IN THE INDIAN OCEAN. THE ECONOMY IS STILL RECOVERING FROM THE 2009 - 2013 POLITICAL CRISIS, AS THE QUALITY OF LIFE REMAINS QUITE LOW FOR THE MAJORITY OF THE POPULATION. IT IS RANKED 164 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. IN ADDITION, 63.6% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 91.6% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. FREQUENT FLOODING AND CLIMATE EVENTS FURTHER CONTAMINATE WATER SOURCES AND DAMAGE EXISTING INFRASTRUCTURE. IN 2021, CHARITY: WATER FUNDED 3,175 WATER PROJECTS THAT WILL SERVE 81,792 PEOPLE.

(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

BANGLADESH: BANGLADESH, WITH A PREDOMINANTLY MUSLIM POPULATION, IS A ONE OF THE MOST DENSELY POPULATED COUNTRIES IN THE WORLD. IT IS RANKED 133 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HUMAN DEVELOPMENT INDEX (HDI). WHILE ONLY 2.1% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, WATER QUALITY REMAINS A LARGE ISSUE. ARSENIC IS A COMMON CONTAMINANT AS IS THE RUNOFF FROM INADEQUATE DRAINAGE SYSTEMS, AND 45% OF THE RURAL POPULATION LACKED AT LEAST BASIC ACCESS TO SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 375 PROJECTS THAT WILL SERVE 225,000 PEOPLE. BURKINA FASO: BURKINA FASO IS A LANDLOCKED COUNTRY LOCATED IN WESTERN AFRICA. UNFORTUNATELY, IT HAS BEEN PLAGUED BY REOCCURRING DROUGHTS AND MILITARY COUPS THAT HAVE CAUSED VIOLENCE AND INSTABILITY THROUGHOUT THE COUNTRY. IT IS RANKED 182 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. 69% OF THE POPULATION LIVED IN RURAL AREAS, WHERE 67.3% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, AND 86.5% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 204 WATER PROJECTS THAT WILL SERVE 58,244 PEOPLE.CAMBODIA: CAMBODIA IS LOCATED IN SOUTHEAST ASIA, AT THE SOUTHERN REGION OF THE INDOCHINA PENINSULA. IT WAS DEVASTATED BY THE REIGN OF KHMER ROUGE, A RURAL COMMUNIST GUERRILLA MOVEMENT, BETWEEN 1975 AND 1979. DURING THIS TIME, AT LEAST 1.5 MILLION PEOPLE WERE KILLED, A DARK TIME FROM WHICH THE COUNTRY CONTINUES TO RECOVER FROM. CAMBODIA IS RANKED 144 OUT OF 189 COUNTIES ON THE MOST RECENT UN HDI. ACCESS TO SANITATION AND IMPROVED HYGIENE PRACTICES IS A CONSIDERABLE HEALTH CHALLENGE IN RURAL AREAS, WHERE 39% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES AND 34.9% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES. IN 2021, CHARITY: WATER FUNDED 843 WATER PROJECTS THAT WILL SERVE 217,880 PEOPLE.THE CENTRAL AFRICAN REPUBLIC: THE CENTRAL AFRICAN REPUBLIC IS A LANDLOCKED COUNTRY IN CENTRAL AFRICA. IT IS RANKED NEARLY AT THE BOTTOM OF THE MOST RECENT UN HDI, AT 188 OUT OF 189 COUNTRIES. THE COUNTRY ALSO STRUGGLES WITH ACCESS TO WATER AND SANITATION, ESPECIALLY IN THE HARD TO REACH, OFTEN ISOLATED RURAL AREAS OF THE COUNTRY. MORE THAN 71% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, AND 94% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 93 WATER PROJECTS THAT WILL SERVE 41,850 PEOPLE.COTE D'IVOIRE: COTE D'IVOIRE IS A COUNTRY LOCATED ON THE COAST OF WESTERN AFRICA. IT IS AN ECONOMIC POWER IN WEST AFRICA, THE SECOND-LARGEST BECAUSE OF ITS POSITION AS THE WORLD'S LARGEST PRODUCER AND EXPORTER OF CASHEWS AND COCOA BEANS. IT IS RANKED 162 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. OF THE 26.4 MILLION POPULATION, 44.3% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 79.5% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 68 WATER PROJECTS THAT WILL SERVE 27,554 PEOPLE.ETHIOPIA: WHILE ONE OF THE WORLD'S OLDEST CIVILIZATIONS AND ONE OF AFRICA'S FASTEST GROWING ECONOMIES, ETHIOPIA IS STILL ONE OF THE MOST UNDER-DEVELOPED NATIONS IN THE WORLD. IT RANKED 173 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. OF THE 115 MILLION POPULATION, 60% IN RURAL AREAS LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 94.6% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 230 WATER PROJECTS THAT WILL SERVE 78,800 PEOPLE.INDIA: INDIA OCCUPIES THE GREATER PART OF SOUTH ASIA AND IS ONE OF THE MOST ETHNICALLY DIVERSE COUNTRIES WITH MANY RELIGIONS, SECTS, TRIBES, AND CASTES. IT IS RANKED 131 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. IT FACES DIFFICULT BARRIERS TO DEVELOPMENT, INCLUDING RAPID POPULATION GROWTH, WHERE 33% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC SANITATION, WHILE 11.2% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES. EXTREME POVERTY, ESPECIALLY AMONG HISTORICALLY DISADVANTAGED CASTES, WATER QUALITY ISSUES, AND WATER SCARCITY HAVE ALSO PROVEN TO BE CHALLENGES IN ACHIEVING FULL WATER AND SANITATION COVERAGE. IN 2021, CHARITY: WATER FUNDED 2,620 WATER PROJECTS THAT WILL SERVE 15,634 PEOPLE. KENYA: KENYA IS LOCATED IN EAST AFRICA AND BORDERS THE INDIAN OCEAN. THE POPULATION OF 53.8 MILLION IS VERY DIVERSE, BEING HOME TO AN ESTIMATED 416,014 REFUGEES FROM NEIGHBORING COUNTRIES IN 2021. KENYA IS RANKED 143 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. THERE IS ALSO AN ESTIMATED 1.4 MILLION PEOPLE LIVING WITH HIV IN THE COUNTRY AS OF 2020. 72% OF THE POPULATION LIVES IN RURAL AREAS, WHERE 48.2% LACKED TO AT LEAST BASIC ACCESS TO WATER SERVICES, WHILE 68.4% LACKED AT LEAST BASIC ACCESS TO SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 79 WATER PROJECTS THAT WILL SERVE 36,376 PEOPLE.LAOS: LAOS IS A LANDLOCKED COUNTRY IN NORTHERN SOUTHEAST ASIA. THE COUNTRY IS SLOWLY EMERGING FROM THE AFTERMATH OF SEVERAL YEARS OF WAR (WORLD WAR II, INDOCHINA WARS, AND ITS OWN CIVIL WAR IN THE SECOND HALF OF THE 20TH CENTURY). IT IS RANKED 137 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. ALTHOUGH LAOS HAS MADE SIGNIFICANT PROGRESS IN INCREASING WATER ACCESS AND BASIC SANITATION THROUGHOUT THE COUNTRY IN RECENT YEARS, IT STILL PROVES TO BE A CHALLENGE TO PROVIDE THE SAME ACCESS TO THOSE LIVING IN RURAL AREAS, WHERE 64 % OF THE POPULATION LIVES. IN RURAL AREAS, 21.5% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, WHILE 30.9% LACKED AT LEAST BASIC ACCESS TO SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 4,923 WATER PROJECTS THAT WILL SERVE 28,186 PEOPLE.MALAWI: A SMALL LANDLOCKED COUNTRY IN SOUTHERN AFRICA WITH A POPULATION OF 19.1 MILLION PEOPLE, MALAWI RANKED 174 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. MORE THAN 33.4% OF THE RURAL MALAWIANS LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 75.1% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. AS A RESULT, DIARRHEAL DISEASES ARE VERY COMMON AND ONE OF THE LEADING CAUSES OF DEATH IN MALAWI, SECOND ONLY TO HIV/AIDS. AN ESTIMATED 990,000 ADULTS LIVE WITH HIV, MAKING MALAWI A COUNTRY WITH ONE OF THE HIGHEST HIV PREVALENCE RATES (8.1%) IN THE WORLD. IN 2021, CHARITY: WATER FUNDED 514 WATER PROJECTS THAT WILL SERVE 173,612 PEOPLE. MALI: MALI IS A LANDLOCKED COUNTRY LOCATED IN THE SAHEL, ONE OF THE HARSHTEST CONTEXTS IN THE WORLD IN WESTERN AFRICA. IT IS PRONE TO SEVERE DROUGHTS AND PROLONGED DRY SEASONS THAT DEEPEN THE WATER SUPPLY CRISIS FOR MALIANS, STRESSING NOT ONLY FOOD PRODUCTION AND LIVELIHOOD ACTIVITIES BUT ALSO CHILD AND MATERNAL HEALTH. MALI IS RANKED 184 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. 27.9% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC DRINKING WATER, AND 62.7% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 198 WATER PROJECTS THAT WILL SERVE 72,980 PEOPLE. MOZAMBIQUE: IN THE YEARS SINCE ITS DEVASTATING CIVIL WAR, MOZAMBIQUE HAS FACED EXTREME POVERTY. IT IS RANKED 181 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. FURTHERMORE, AN ESTIMATED 2.1 MILLION ADULTS LIVE WITH HIV, MAKING MOZAMBIQUE A COUNTRY WITH ONE OF THE HIGHEST HIV PREVALENCE RATES (11.5%) IN THE WORLD. WATER QUALITY IN PARTICULAR HAS BEEN A CHALLENGE, AS FLOODS AND EARTHQUAKES HAVE EXACERBATED THE GROWING WATER CRISIS. 51.1% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 77% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 285 WATER PROJECTS THAT WILL SERVE 107,700 PEOPLE.NEPAL: NEPAL IS A LANDLOCKED COUNTRY IN SOUTH ASIA BORDERED BY INDIA AND CHINA. NEPAL'S HISTORY HAS LONG BEEN ONE OF STAYING ISOLATED FROM THE OUTSIDE WORLD. IT WAS ADMITTED TO THE UNITED NATIONS IN 1955 AND ONLY RECENTLY BECAME A DEMOCRATIC REPUBLIC IN 2008 AFTER A DECADE LONG PERIOD OF POLITICAL VIOLENCE WITH A STRONG MAOIST INFLUENCE. IT IS RANKED 142 OUT OF 189 COUNTRIES ON THE MOST

RECENT UN HDI. 79% OF THE POPULATION LIVE IN RURAL AREAS, WHERE 9.8% LACKED ACCESS TO AT LEAST BASIC WATER SERVICES AND 23.3% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 8,347 WATER PROJECTS THAT WILL SERVE 68,179 PEOPLE.NIGER: NIGER, RANKED AT THE BOTTOM (189) OF THE MOST RECENT UN HDI, IS LOCATED LARGELY IN THE SAHARA DESERT, MAKING FOR HARSH LIVING CONDITIONS FOR ITS PREDOMINANTLY MUSLIM POPULATION. BECAUSE OF ITS LOCATION, IT IS PRONE TO FREQUENT DROUGHTS AND PROLONGED DRY SEASONS THAT POSE CHALLENGES FOR ACCESS TO CLEAN WATER, PARTICULARLY IN RURAL AREAS, WHERE 60.9% LACKED AT LEAST BASIC WATER SERVICES. IN ADDITION, 92.6% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES, WHERE DIARRHEAL DISEASES ARE AMONG THE LEADING CAUSES OF DEATH. IN 2021, CHARITY: WATER FUNDED 103 WATER PROJECTS THAT WILL SERVE 51,150 PEOPLE.

(Code: ) (Expenses \$ 52,687,013 including grants of \$ 49,195,549 ) (Revenue \$ )

SENEGAL: SENEGAL IS A COUNTRY IN WEST AFRICA WITH THE GAMBIA RIVER SEPARATING THE CASAMANCE REGION FROM THE REST OF THE COUNTRY. IT REMAINED UNDER FRENCH CONTROL UNTIL THE LATE 19TH CENTURY, FINALLY GAINING SOVEREIGNTY AS A SEPARATE NATION IN 1960. UNFORTUNATELY, INTERNAL CHALLENGES SUCH AS THE GROWING POPULATION AND WIDESPREAD UNEMPLOYMENT CONTINUE TO PLAGUE THE COUNTRY. IT IS RANKED 168 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI, WHERE 24.8% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, WHILE 53.4% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 1,033 WATER PROJECTS THAT WILL SERVE 14,153 PEOPLE.SIERRA LEONE: SIERRA LEONE IS ON THE COAST OF WEST AFRICA. ALTHOUGH MUCH OF THE POPULATION RELIES HEAVILY ON FARMING AND AGRICULTURE, IT IS ALSO A MINING HUB. IT IS RANKED 182 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI, WHERE 47.3% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, WITH AN ALARMING 90.1% WHO LACKED ACCESS TO BASIC SANITATION SERVICES. FURTHERMORE, AN EBOLA VIRUS OUTBREAK IN MAY 2014 OVERBURDENED AN ALREADY WEAK HEALTHCARE INFRASTRUCTURE, WHICH BOTH AIDED THE SPREAD OF THE VIRUS AND CONTRIBUTED TO A TRAGICALLY HIGH DEATH TOLL. OVER A YEAR LATER, IT WAS DECLARED THAT THE EBOLA VIRUS WAS CONTAINED IN NOVEMBER 2015. IN 2021, CHARITY: WATER FUNDED 602 WATER PROJECTS THAT WILL SERVE 67,122 PEOPLE.TANZANIA: TANZANIA IS A COUNTRY IN EAST AFRICA, WHERE AFRICA'S HIGHEST MOUNTAIN, MOUNT KILIMANJARO, IS LOCATED. IT WAS UNDER GERMAN RULE FOR MUCH OF THE 19TH CENTURY, FOLLOWED BY BRITISH RULE POST WWI. IN 1964, THE MAINLAND AND THE ARCHIPELAGO MERGED TOGETHER TO OFFICIALLY FORM THE UNITED REPUBLIC OF TANZANIA. THE COUNTRY IS RANKED 163 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. OVER 54.6% OF THE RURAL POPULATION LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, WHILE 76.7% LACKED ACCESS TO BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 109 WATER PROJECTS THAT WILL SERVE 30,912 PEOPLE.ZIMBABWE: ZIMBABWE IS A LANDLOCKED COUNTRY IN SOUTHERN AFRICA. AFTER YEARS OF ECONOMIC CRISIS AND POLITICAL TURMOIL, REPEATED DROUGHTS AND FLOODS, AND CYCLONE DINEO IN 2017, ACCESS TO BASIC WATER AND SANITATION REMAINS A MAJOR ISSUE FOR ZIMBABWE. THIS IS ESPECIALLY TRUE IN RURAL AREAS, WHERE 68% OF THE POPULATION RESIDES. ZIMBABWE IS RANKED 150 OUT OF 189 COUNTRIES ON THE MOST RECENT UN HDI. 51.7% OF RURAL ZIMBABWEANS LACKED ACCESS TO AT LEAST BASIC WATER SERVICES, AND 68% LACKED ACCESS TO AT LEAST BASIC SANITATION SERVICES. IN 2021, CHARITY: WATER FUNDED 270 WATER PROJECTS THAT WILL SERVE 49,500 PEOPLE.

4d	Other program services (Describe in Schedule O.)	(Expenses \$ 52,687,013 including grants of \$ 49,195,549 ) (Revenue \$ )
4e	Total program service expenses ►	82,906,574

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 <b>Section 501(c)(3) organizations.</b> 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	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?	11f Yes	
12a If "Yes," complete Schedule D, Part XI. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	No

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	33
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . . . . .	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes



Part V		Statements Regarding Other IRS Filings and Tax Compliance (continued)						
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	103			
b		If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.		2b		Yes		
3a		Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . .		3a			No	
b		If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O . . . .</i>		3b				
4a		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		Yes		
b		If "Yes," enter the name of the foreign country: <b>UK</b> <i>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts</i>						
5a		Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .		5a			No	
b		Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b			No	
c		If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .		5c				
6a		Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . .		6a			No	
b		If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		6b				
7		Organizations that may receive deductible contributions under section 170(c).						
a		Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .		7a		Yes		
b		If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		7b		Yes		
c		Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		7c			No	
d		If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		7d				
e		Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e			No	
f		Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f			No	
g		If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		7g				
h		If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .		7h				
8		Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8				
9		Sponsoring organizations maintaining donor advised funds.						
a		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:						
a		Initiation fees and capital contributions included on Part VIII, line 12 . . . . .		10a				
b		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b				
11		Section 501(c)(12) organizations. Enter:						
a		Gross income from members or shareholders . . . . .		11a				
b		Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		11b				
12a		Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a				
b		If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b				
13		Section 501(c)(29) qualified nonprofit health insurance issuers.						
a		Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		13a				
b		Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .		13b				
c		Enter the amount of reserves on hand . . . . .		13c				
14a		Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		14a			No	
b		If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . .</i>		14b				
15		Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		15			No	
16		If the organization is a trust, did it file Form 720, Schedule E, to report the section 4968 excise tax on net investment income?		16			No	
17		Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . If "Yes," complete Form 6069.		17				

Part VI

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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	11		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	10		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☒ Own website

☐ Another's website

☒ 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:

ANDREA JAFFE CO CHARITY WATER PO BOX 5026 HAGERSTOWN, MD 217415026 (646) 688-2323

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SCOTT HARRISON FOUNDER/CEO	50.00 0.00	X		X				388,457	0	34,821
(2) MICHAEL WILKERSON CHAIRPERSON	2.00 0.00	X		X				0	0	0
(3) CHIDI ACHARA BOARD MEMBER	2.00 0.00	X						0	0	0
(4) ANGELA AHRENDTS BOARD MEMBER	2.00 0.00	X						0	0	0
(5) CHI-HUA CHIEN BOARD MEMBER	2.00 0.00	X						0	0	0
(6) BRANT CRYDER BOARD MEMBER	2.00 0.00	X						0	0	0
(7) VALERIE DONATI BOARD MEMBER	2.00 0.00	X						0	0	0
(8) BROOK HAZELTON BOARD MEMBER	2.00 0.00	X						0	0	0
(9) RYAN GRAVES BOARD MEMBER	2.00 0.00	X						0	0	0
(10) IJE NWOKORIE BOARD MEMBER	2.00 0.00	X						0	0	0
(11) SHANNON SEDGWICK DAVIS BOARD MEMBER	2.00 0.00	X						0	0	0
(12) CHRISTOPH GORDER CHIEF GLOBAL WATER OFFICER	50.00 0.00			X				268,293	0	35,358
(13) ADITI DEEG CHIEF FINANCIAL & OPS OFFICER	50.00 0.00			X				271,758	0	3,873
(14) CHRISTOPHER BARTON SECRETARY/GEN COUNSEL	30.00 0.00			X				105,231	0	27,186
(15) MARLA GOODMAN CHIEF REVENUE OFFR (THRU 10/22/2021)	50.00 0.00				X			282,078	0	6,354
(16) BENJAMIN GREENE CHIEF DEVELOPMENT OFFICER	50.00 0.00				X			246,232	0	36,963
(17) JOHN BAYNE VP OF ENGINEERING	50.00 0.00					X		186,277	0	12,728



Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BRIAN HOYER .....	50.00 .....					X		175,954	0	12,513
VP OF PROGRAM OPERATIONS	0.00									
(19) JULIA ANDERSON .....	50.00 .....					X		171,238	0	4,214
VP OF PARTNERSHIPS	0.00									
(20) CHRISTINE CHOE .....	50.00 .....					X		170,458	0	3,952
VP OF FINANCE & BUSINESS OPERATIONS	0.00									
(21) JASDEEP GOSAL .....	50.00 .....					X		151,359	0	26,040
PRINCIPAL ENGINEER	0.00									
(22) LAUREN LETTA .....	50.00 .....						X	117,435	0	2,566
CHIEF OPERATING OFFR (THRU 1/29/21)	0.00									

1b Sub-Total . . . . .	▶			
c Total from continuation sheets to Part VII, Section A . . . . .	▶			
d Total (add lines 1b and 1c) . . . . .	▶	2,534,770	0	206,568

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 3 1

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3 Yes	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4 Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

Section B. Independent Contractors

1

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
TWISTHINK LLC  43 E 8TH STREET STE 250 HOLLAND, MI 49423	SENSOR CONSULTING	655,187
WE CONSULT  PO BOX 22856 KAMPALA UG	SUSTAIN. CONSULTING	501,498
HELVETAS USA  101 CONNECTICUT AVE NW SUITE 450 WASHINGTON, DC 20036	WTR PRJCT FEAS CONS.	224,166
THRIVE DIGITAL LTD  700 - 675 W HASTINGS ST VANCOUVER CA	MEDIA AGENCY	168,048
SALESFORCECOM INC  415 MISSION STREET 3RD FLOOR SAN FRANCISCO, CA 94105	DNR/GRNT MGMT SYSTEM	160,485
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 1 3		

Part VIII

Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other	<b>1a</b> Federated campaigns . . . <b>b</b> Membership dues . . . <b>c</b> Fundraising events . . . <b>d</b> Related organizations <b>e</b> Government grants (contributions) <b>f</b> All other contributions, gifts, grants, and similar amounts not included above <b>g</b> Noncash contributions included in lines 1a - 1f:\$ <b>h Total.</b> Add lines 1a-1f . . .	<b>1a</b>	449,209	
Amt Similar Amounts		<b>1b</b>		
		<b>1c</b>	4,017,576	
		<b>1d</b>		
		<b>1e</b>		
		<b>1f</b>	96,056,482	
		<b>1g</b>	13,414,724	
			100,523,267	

Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue.					
<b>9 Total.</b> Add lines 2a-2f. . . . .						

Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		1,522,700			1,522,700
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties . . . . .					
	<b>6a</b> Gross rents	(i) Real	(ii) Personal			
	<b>b</b> Less: rental expenses	<b>6b</b>				
	<b>c</b> Rental income or (loss)	<b>6c</b>				
	<b>d</b> Net rental income or (loss) . . . . .					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>				
	<b>c</b> Gain or (loss)	<b>7c</b>	2,606			
	<b>d</b> Net gain or (loss) . . . . .		2,606			2,606
	<b>8a</b> Gross income from fundraising events (not including \$ 4,017,576 of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>	0			
		<b>8b</b>	191,667			
	<b>c</b> Net income or (loss) from fundraising events . . .		-191,667			-191,667
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . .	<b>9a</b>				
		<b>9b</b>				
	<b>c</b> Net income or (loss) from gaming activities . . .					
	<b>10a</b> Gross sales of inventory, less returns and allowances . . .	<b>10a</b>				
		<b>10b</b>				
	<b>c</b> Net income or (loss) from sales of inventory . . .					
	Miscellaneous Revenue	Business Code				
	<b>11a</b> MISCELLANEOUS INCOME	900099	-245,767			-245,767
	<b>b</b>					
	<b>c</b>					
	<b>d</b> All other revenue . . . . .					
	<b>e Total.</b> Add lines 11a-11d . . . . .		-245,767			
	<b>12 Total revenue.</b> See instructions . . . . .		101,611,139	0	0	1,087,872

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .				
2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .	78,530,167	78,530,167		
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	1,717,029	346,594	595,676	774,759
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7 Other salaries and wages . . . . .	7,804,636	1,327,675	2,518,569	3,958,392
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	116,989	23,876	33,564	59,549
9 Other employee benefits . . . . .	740,427	162,451	218,538	359,438
10 Payroll taxes . . . . .	708,823	121,249	232,370	355,204
11 Fees for services (non-employees):				
a Management . . . . .				
b Legal . . . . .	1,548	150	351	1,047
c Accounting . . . . .	246,901	71,562	143,686	31,653
d Lobbying . . . . .				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees . . . . .	349,637		349,637	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,585,150	348,432	571,891	664,827
12 Advertising and promotion . . . . .	2,753,976			2,753,976
13 Office expenses . . . . .	1,078,615	192,791	350,078	535,746
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .	144,182	25,771	46,796	71,615
17 Travel . . . . .	247,479	60,535	75,215	111,729
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .				
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	78,539	14,038	25,491	39,010
23 Insurance . . . . .	155,954	27,875	50,617	77,462
24 Other expenses. Itemize expenses not covered 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 O.)				
a SUSTAINABILITY FUNDING	1,653,408	1,653,408		
b BANK CHARGES	866,372		866,372	
c EVENT COSTS	12,111			12,111
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	98,791,943	82,906,574	6,078,851	9,806,518
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing . . . . .		19,196,137	1	23,711,718	
	2	Savings and temporary cash investments . . . . .		45,240,582	2	40,475,195	
	3	Pledges and grants receivable, net . . . . .		41,924,929	3	42,468,997	
	4	Accounts receivable, net . . . . .		0	4	0	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		0	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .		0	6	0	
	7	Notes and loans receivable, net . . . . .		0	7	0	
	8	Inventories for sale or use . . . . .		0	8	0	
	9	Prepaid expenses and deferred charges . . . . .		857,232	9	650,283	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	1,827,697			
	b	Less: accumulated depreciation	10b	1,728,504	177,732	10c	99,193
	11	Investments—publicly traded securities . . . . .		29,814,751	11	65,548,292	
	12	Investments—other securities. See Part IV, line 11 . . . . .		0	12	0	
	13	Investments—program-related. See Part IV, line 11 . . . . .		0	13	0	
	14	Intangible assets . . . . .		0	14	0	
	15	Other assets. See Part IV, line 11 . . . . .		87,797	15	102,343	
16	Total assets: Add lines 1 through 15 (must equal line 33) . . . . .		137,299,160	16	173,056,021		
Liabilities	17	Accounts payable and accrued expenses . . . . .		1,789,451	17	1,354,891	
	18	Grants payable . . . . .		44,651,996	18	77,485,909	
	19	Deferred revenue . . . . .		0	19	0	
	20	Tax-exempt bond liabilities . . . . .		0	20	0	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		0	21	0	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .		0	23	0	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .		0	24	0	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D . . . . .		16,487	25		
	26	Total liabilities: Add lines 17 through 25 . . . . .		46,457,934	26	78,840,800	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions . . . . .		26,382,936	27	30,214,719	
	28	Net assets with donor restrictions . . . . .		64,458,290	28	64,000,502	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds . . . . .			29		
	30	Paid-in or capital surplus, or land, building or equipment fund . . . . .			30		
	31	Retained earnings, endowment, accumulated income, or other funds . . . . .			31		
	32	Total net assets or fund balances . . . . .		90,841,226	32	94,215,221	
	33	Total liabilities and net assets/fund balances . . . . .		137,299,160	33	173,056,021	

Part XI

Reconciliation of Net Assets

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

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	101,611,139
2	Total expenses (must equal Part IX, column (A), line 25)	2	98,791,943
3	Revenue less expenses. Subtract line 2 from line 1	3	2,819,196
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	90,841,226
5	Net unrealized gains (losses) on investments	5	-819,479
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	1,374,278
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	94,215,221

Part XII

Financial Statements and Reporting

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

☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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.		

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

**Special Condition Description**



Part I 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 12, check only one box.)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

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.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- 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.**
- 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.**
- d

☐

**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.**
- e

☐

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.
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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 failed to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	49,827,030	69,223,898	88,948,068	90,196,522	100,523,267	398,718,785
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge. .						
<b>4 Total.</b> Add lines 1 through 3	49,827,030	69,223,898	88,948,068	90,196,522	100,523,267	398,718,785
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						13,525,547
<b>6 Public support.</b> Subtract line 5 from line 4.						385,193,238

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4. . .	49,827,030	69,223,898	88,948,068	90,196,522	100,523,267	398,718,785
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	754,462	1,037,863	1,346,789	1,056,645	1,522,700	5,718,459
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	122,640	725,564	158,252	350,703	-245,767	1,111,392
<b>11 Total support.</b> Add lines 7 through 10						405,548,636
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	287,923

**13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ☐

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	94.980 %
<b>15</b> Public support percentage for 2020 Schedule A, Part II, line 14 . . . . .	<b>15</b>	94.210 %

- 16a 33 1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ☒
- b 33 1/3% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ☐
- 17a 10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ☐
- b 10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ☐
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ☐

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) .						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. . . . .						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	
16 Public support percentage from 2020 Schedule A, Part III, line 15 . . . . .	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2021 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	
18 Investment income percentage from 2020 Schedule A, Part III, line 17 . . . . .	18	
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV

Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described on 11a above?		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, 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 tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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 the supported organization(s).		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)			
2	Activities Test. Answer lines 2a and 2b below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No", provide details in Part VI.			
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.			

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

- 1**    ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in **Part VI***). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

**Section A - Adjusted Net Income**

(A) Prior Year

(B) Current Year  
(optional)

- |                                                                                                                                                                                                                   |          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| <b>1</b> Net short-term capital gain                                                                                                                                                                              | <b>1</b> |
| <b>2</b> Recoveries of prior-year distributions                                                                                                                                                                   | <b>2</b> |
| <b>3</b> Other gross income (see instructions)                                                                                                                                                                    | <b>3</b> |
| <b>4</b> Add lines 1 through 3                                                                                                                                                                                    | <b>4</b> |
| <b>5</b> Depreciation and depletion                                                                                                                                                                               | <b>5</b> |
| <b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | <b>6</b> |
| <b>7</b> Other expenses (see instructions)                                                                                                                                                                        | <b>7</b> |
| <b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)                                                                                                                                              | <b>8</b> |

**Section B - Minimum Asset Amount**

(A) Prior Year

(B) Current Year  
(optional)

- |                                                                                                                                          |           |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| <b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | <b>1</b>  |
| <b>a</b> Average monthly value of securities                                                                                             | <b>1a</b> |
| <b>b</b> Average monthly cash balances                                                                                                   | <b>1b</b> |
| <b>c</b> Fair market value of other non-exempt-use assets                                                                                | <b>1c</b> |
| <b>d Total</b> (add lines 1a, 1b, and 1c)                                                                                                | <b>1d</b> |
| <b>e Discount</b> claimed for blockage or other factors ( <i>explain in detail in <b>Part VI</b></i> ):                                  |           |
| <b>2</b> Acquisition indebtedness applicable to non-exempt use assets                                                                    | <b>2</b>  |
| <b>3</b> Subtract line 2 from line 1d                                                                                                    | <b>3</b>  |
| <b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).                                  | <b>4</b>  |
| <b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)                                                                | <b>5</b>  |
| <b>6</b> Multiply line 5 by 0.035                                                                                                        | <b>6</b>  |
| <b>7</b> Recoveries of prior-year distributions                                                                                          | <b>7</b>  |
| <b>8 Minimum Asset Amount</b> (add line 7 to line 6)                                                                                     | <b>8</b>  |

**Section C - Distributable Amount**

Current Year

- |                                                                                                                                |          |
|--------------------------------------------------------------------------------------------------------------------------------|----------|
| <b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)                                                 | <b>1</b> |
| <b>2</b> Enter 85% of line 1                                                                                                   | <b>2</b> |
| <b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)                                                | <b>3</b> |
| <b>4</b> Enter greater of line 2 or line 3                                                                                     | <b>4</b> |
| <b>5</b> Income tax imposed in prior year                                                                                      | <b>5</b> |
| <b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | <b>6</b> |

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



<b>Part V</b> <b>Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations</b>		(continued)
<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts ( <i>prior IRS approval required - provide details in <b>Part VI</b></i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in <b>Part VI</b></i> ). See instructions	<b>6</b>	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in <b>Part VI</b></i> ). See instructions	<b>8</b>	
<b>9</b> Distributable amount for 2021 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by Line 9 amount	<b>10</b>	

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i)</b> <b>Excess Distributions</b>	<b>(ii)</b> <b>Underdistributions</b> <b>Pre-2021</b>	<b>(iii)</b> <b>Distributable</b> <b>Amount for 2021</b>
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required-- <i>explain in <b>Part VI</b></i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021:			
<b>a</b> From 2016. . . . .			
<b>b</b> From 2017. . . . .			
<b>c</b> From 2018. . . . .			
<b>d</b> From 2019. . . . .			
<b>e</b> From 2020. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.			
<b>7 Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017. . . . .			
<b>b</b> Excess from 2018. . . . .			
<b>c</b> Excess from 2019. . . . .			
<b>d</b> Excess from 2020. . . . .			
<b>e</b> Excess from 2021. . . . .			

**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).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	MISCELLANEOUS INCOME - 2017 AMOUNT: \$ 122,640. 2018 AMOUNT: \$ 725,564. 2019 AMOUNT: \$ 158,252. 2020 AMOUNT: \$ 350,703. 2021 AMOUNT: \$ -245,767.

## Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization CHARITY GLOBAL INC	Employer identification number 22-3936753
------------------------------------------------	----------------------------------------------

Part I 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
1	Total number at end of year . . . . .	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year . . . . .	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No	
6	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? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space											
2	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.											
a	Total number of conservation easements . . . . .	<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></table>		Held at the End of the Year	2a		2b		2c		2d	
	Held at the End of the Year											
2a												
2b												
2c												
2d												
b	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 7/25/06, and not on a historic structure listed in the National Register . . . . .											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____											
4	Number of states where property subject to conservation easement is located ▶ _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No											
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____											
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No											
9	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.											

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ _____ (ii) Assets included in Form 990, Part X . . . . . ▶ \$ _____	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ _____ b Assets included in Form 990, Part X . . . . . ▶ \$ _____	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other .....

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c

Beginning balance . . . . .

d

Additions during the year . . . . .

e

Distributions during the year . . . . .

f

Ending balance . . . . .

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . .

☐

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance . . . . .					
b Contributions . . . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶ .....

b

Permanent endowment ▶ .....

c

Term endowment ▶ .....

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations . . . . .

(ii) Related organizations . . . . .

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements		5,942	5,942	0
d Equipment . . . . .		1,821,755	1,722,562	99,193
e Other . . . . .				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				99,193

Schedule D (Form 990) 2021

Part VII

Investments - Other Securities.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII

Investments - Program Related.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) ►		

Part IX

Other Assets.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) . . . . . ►	

Part X

Other Liabilities.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.  
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ►	

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



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	101,120,190
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments . . . . .	2a	-819,479
b	Donated services and use of facilities . . . . .	2b	486,500
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII.) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	-332,979
3	Subtract line 2e from line 1 . . . . .	3	101,453,169
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	349,637
b	Other (Describe in Part XIII.) . . . . .	4b	-191,667
c	Add lines 4a and 4b . . . . .	4c	157,970
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . .	5	101,611,139

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements . . . . .	1	97,746,195
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities . . . . .	2a	486,500
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIII.) . . . . .	2d	-1,182,611
e	Add lines 2a through 2d . . . . .	2e	-696,111
3	Subtract line 2e from line 1 . . . . .	3	98,442,306
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	349,637
b	Other (Describe in Part XIII.) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	349,637
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . .	5	98,791,943

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART X, LINE 2:	CHARITY: WATER RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. INCOME GENERATED FROM ACTIVITIES UNRELATED TO CHARITY: WATER'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER INTERNAL REVENUE CODE SECTION 511. CHARITY: WATER DID NOT RECOGNIZE ANY UNRELATED BUSINESS INCOME TAX LIABILITY FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	VIRTUAL FUNDRAISING EVENT - DIRECT EXPENSES -191,667.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	DISCOUNT ON GRANTS PAYABLE -1,374,278. VIRTUAL FUNDRAISING EVENT - DIRECT EXPENSES 191,667.

## Additional Data

[Return to Form](#)

**Software ID:**

**Software Version:**

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
CHARITY GLOBAL INC

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number  
22-3936753

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING	WATER PROJECTS	5,350,056
(2) SOUTH ASIA	0	0	GRANTMAKING	WATER PROJECTS	8,981,445
(3) SUB-SAHARAN AFRICA	0	0	GRANTMAKING	WATER PROJECTS	64,198,666
(4) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	WATER PROJ. SUST.	23,388
(5) SOUTH ASIA	0	0	PROGRAM SERVICES	WATER PROJ. SUST.	245,905
(6) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	WATER PROJ. SUST.	1,384,115
(7) SOUTH ASIA	0	0	PROGRAM SERVICES	WATER PROGRAMS	17,462
(8) SUB-SAHARAN AFRICA	0	1	PROGRAM SERVICES	WATER PROGRAMS	99,068
(9) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	2	PROGRAM SERVICES	WATER PROGRAMS	164,070
(10) EUROPE (INCLUDING ICELAND AND GREENLAND)	1	2	MAINTAINING OFFICES		26,426
(11) SUB-SAHARAN AFRICA	0	0	PROFESSIONALSERVICES		746
(12) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES		1,500
(13) NORTH AMERICA	0	1	PROFESSIONALSERVICES		168,048
(14)					
(15)					
(16)					
(17)					
3a Sub-total . . . . .	0	1			80,300,105
b Total from continuation sheets to Part I . . . . .	1	5			360,790
c Totals (add lines 3a and 3b)	1	6			80,660,895

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States.

Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA AND THE PACIFIC	PGRM. FUNDING-GRANT	3,000,000	WIRE TRFR	0		
(2)			EAST ASIA AND THE PACIFIC	PGRM. FUNDING-GRANT	1,800,056	WIRE TRFR	0		
(3)			EAST ASIA AND THE PACIFIC	PGRM. FUNDING-GRANT	550,000	WIRE TRFR	0		
(4)			SOUTH ASIA	PGRM. FUNDING-GRANT	2,061,450	WIRE TRFR	0		
(5)			SOUTH ASIA	PGRM. FUNDING-GRANT	2,350,000	WIRE TRFR	0		
(6)			SOUTH ASIA	PGRM. FUNDING-GRANT	400,000	WIRE TRFR	0		
(7)			SOUTH ASIA	PGRM. FUNDING-GRANT	2,500,000	WIRE TRFR	0		
(8)			SOUTH ASIA	PGRM. FUNDING-GRANT	720,000	WIRE TRFR	0		
(9)			SOUTH ASIA	PGRM. FUNDING-GRANT	949,995	WIRE TRFR	0		
(10)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	15,307,551	WIRE TRFR	0		
(11)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	8,080,000	WIRE TRFR	0		
(12)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	375,000	WIRE TRFR	0		
(13)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	6,331,098	WIRE TRFR	0		
(14)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	1,830,000	WIRE TRFR	0		
(15)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	6,200,000	WIRE TRFR	0		
(16)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	508,898	WIRE TRFR	0		
(17)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	2,000,000	WIRE TRFR	0		
(18)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	1,300,000	WIRE TRFR	0		
(19)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	1,199,997	WIRE TRFR	0		
(20)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	3,900,000	WIRE TRFR	0		
(21)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	6,196,000	WIRE TRFR	0		
(22)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	315,179	WIRE TRFR	0		
(23)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	4,904,943	WIRE TRFR	0		
(24)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	1,000,000	WIRE TRFR	0		
(25)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	700,000	WIRE TRFR	0		
(26)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	500,000	WIRE TRFR	0		
(27)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	1,600,000	WIRE TRFR	0		
(28)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	750,000	WIRE TRFR	0		
(29)			SUB-SAHARAN AFRICA	PGRM. FUNDING-GRANT	1,200,000	WIRE TRFR	0		

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

28

0

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
( 1 )							
( 2 )							
( 3 )							
( 4 )							
( 5 )							
( 6 )							
( 7 )							
( 8 )							
( 9 )							
( 10 )							
( 11 )							
( 12 )							
( 13 )							
( 14 )							
( 15 )							
( 16 )							
( 17 )							
( 18 )							

**Part IV Foreign Forms**

- 1

Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . .

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . .

☒ Yes

☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . . . . .

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . .

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* . . . . .

☐ Yes

☒ No



# Additional Data

**Software ID:**

**Software Version:**



Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.  
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☐ Mail solicitations

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II

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

Revenue		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events
		<u>VIRTUAL EVENT</u> (event type)	<u>(event type)</u>	<u>(total number)</u>	(add col. (a) through col. (c))
	1 Gross receipts . . . . .	4,017,576			4,017,576
	2 Less: Contributions . . . . .	4,017,576			4,017,576
	3 Gross income (line 1 minus line 2) . . . . .				
Direct Expenses	4 Cash prizes . . . . .				
	5 Noncash prizes . . . . .				
	6 Rent/facility costs . . . . .	5,000			5,000
	7 Food and beverages . . . . .				
	8 Entertainment . . . . .				
	9 Other direct expenses . . . . .	186,667			186,667
	10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				191,667
	11 Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				-191,667

Part III

Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
	1 Gross revenue . . . . .				
Direct Expenses	2 Cash prizes . . . . .				
	3 Noncash prizes . . . . .				
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .				
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶				

9 Enter the state(s) in which the organization conducts gaming activities:\_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . ☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ -----

Address ▶ -----

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.

c

If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ -----

Description of services provided ▶ -----

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions:

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See Instructions.

Return Reference	Explanation
------------------	-------------

Part I Questions Regarding Compensation

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel

☐ Housing allowance or residence for personal use

☐ Travel for companions

☐ Payments for business use of personal residence

☐ Tax idemnification and gross-up payments

☐ Health or social club dues or initiation fees

☐ Discretionary spending account

☐ Personal services (e.g., maid, chauffeur, chef)

**b** If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

☒ Compensation committee

☐ Written employment contract

☐ Independent compensation consultant

☒ Compensation survey or study

☒ Form 990 of other organizations

☒ Approval by the board or compensation committee

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

**a** Receive a severance payment or change-of-control payment?

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

**a** The organization?

**b** Any related organization?

If "Yes," on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

**a** The organization?

**b** Any related organization?

If "Yes," on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a	Yes	
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7	Yes	
8		No
9		

Part II

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1SCOTT HARRISON FOUNDER/CEO	(i)	387,255	0	1,202	3,297	31,524	423,278	0
	(ii)	0	0	0	0	0	0	0
2CHRISTOPH GORDER CHIEF GLOBAL WATER OFFICER	(i)	251,283	15,851	1,159	5,618	29,740	303,651	0
	(ii)	0	0	0	0	0	0	0
3MARLA GOODMAN CHIEF REVENUE OFFR (THRU 10/22/2021)	(i)	200,859	1,848	79,371	3,132	3,222	288,432	0
	(ii)	0	0	0	0	0	0	0
4BENJAMIN GREENE CHIEF DEVELOPMENT OFFICER	(i)	234,194	11,848	190	5,064	31,899	283,195	0
	(ii)	0	0	0	0	0	0	0
5ADITI DEEG CHIEF FINANCIAL & OPS OFFICER	(i)	259,678	11,848	232	2,169	1,704	275,631	0
	(ii)	0	0	0	0	0	0	0
6JOHN BAYNE VP OF ENGINEERING	(i)	184,022	2,098	157	3,757	8,971	199,005	0
	(ii)	0	0	0	0	0	0	0
7BRIAN HOYER VP OF PROGRAM OPERATIONS	(i)	171,417	4,396	141	3,484	9,029	188,467	0
	(ii)	0	0	0	0	0	0	0
8JASDEEP GOSAL PRINCIPAL ENGINEER	(i)	145,167	5,876	316	3,065	22,975	177,399	0
	(ii)	0	0	0	0	0	0	0
9JULIA ANDERSON VP OF PARTNERSHIPS	(i)	166,244	4,869	125	3,375	839	175,452	0
	(ii)	0	0	0	0	0	0	0
10CHRISTINE CHOE VP OF FINANCE & BUSINESS OPERATIONS	(i)	165,050	5,284	124	3,351	601	174,410	0
	(ii)	0	0	0	0	0	0	0
11LAUREN LETTA CHIEF OPERATING OFFR (THRU 1/29/21)	(i)	117,419	0	16	0	2,566	120,001	0
	(ii)	0	0	0	0	0	0	0

**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.

Return Reference	Explanation
PART I, LINE 4A	MARLA GOODMAN RECEIVED SEVERANCE COMPENSATION OF \$78,923 IN CALENDAR YEAR 2021.
PART I, LINE 7	AMOUNTS REPORTED IN COLUMN (B)(II) REPRESENT DISCRETIONARY BONUS PAYMENTS.

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

Name of the organization  
CHARITY GLOBAL INC

Employer identification number  
22-3936753

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	74	8,016,703	FMV AT TIME OF SALE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
Other ( VIRTUAL ► CURRENCY )	X	416	5,381,333	FMV
26 Other ► ( SUPPLIES )	X	2	16,688	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

2912

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 isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

YesNo

30aNo

31Yes

32aNo

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

Cat. No. 51227J

Schedule M (Form 990) (2021)



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

Return Reference	Explanation
SCHEDULE M, PART I, COLUMN (B)	CHARITY: WATER IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED IN COLUMN (B) OF SCHEDULE M, PART I.

# Additional Data

Return to Form

Software ID:

Software Version:

Name of the organization

CHARITY GLOBAL INC

Employer identification number

22-3936753

Return Reference	Explanation
FORM 990, PART I, LINE 1 AND PART III, LINE 1	DESCRIPTION OF ORGANIZATION MISSION: CHARITY: WATER IS A NON-PROFIT ORGANIZATION BRINGING CLEAN AND SAFE WATER TO PEOPLE AROUND THE WORLD. 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 PARTNER ORGANIZATIONS, 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 VI, SECTION B, 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 INPUTTED BY THE RETURN PREPARER AND A REVISED DRAFT IS EMAILED TO THE ENGAGED INDEPENDENT ACCOUNTING FIRM FOR REVIEW. AFTER ALL CHANGES ARE MADE AND AGREED TO BY THE ENGAGED INDEPENDENT ACCOUNTING FIRM, THE FINAL FORM 990 IS THEN SENT BY THE RETURN PREPARER VIA EMAIL TO THE FOUNDER/CEO, CFO AND FINANCE COMMITTEE FOR FINAL REVIEW. ONCE FINAL APPROVAL IS OBTAINED FROM THE ABOVE-SEATED OFFICERS, THE FINAL FORM 990 IS SENT TO MANAGEMENT FOR SIGNATURE AND A COPY OF THE FINAL FORM 990 IS FORWARDED TO ALL SEATED BOARD MEMBERS PRIOR TO FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, 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 ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. IN ADDITION, ON SUCH STATEMENT, INTERESTED PERSONS SHALL DISCLOSE OR UPDATE THEIR INTERESTS THAT COULD GIVE RISE TO A CONFLICT OF INTEREST, SUCH AS A LIST OF FAMILY MEMBERS, SUBSTANTIAL BUSINESS OR INVESTMENT HOLDINGS, AND OTHER TRANSACTIONS OR AFFILIATIONS WITH BUSINESSES AND OTHER ORGANIZATIONS AND THOSE OF FAMILY MEMBERS. TO ENSURE THE ORGANIZATION OPERATES IN A MANNER CONSISTENT WITH CHARITABLE PURPOSES AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS TAX EXEMPT STATUS, REGULAR AND CONSISTENT REVIEWS (AT LEAST ANNUALLY) SHALL BE CONDUCTED. THE REVIEWS SHALL, AT A MINIMUM, INCLUDE THE FOLLOWING SUBJECTS: A. WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE, BASED ON COMPETENT SURVEY INFORMATION, AND THE RESULT OF ARM'S-LENGTH BARGAINING. B. WHETHER PARTNERSHIPS, JOINT VENTURES AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE ORGANIZATION'S WRITTEN POLICIES ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENTS OR PAYMENTS FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION. C. WHETHER THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS IS PROPERLY IMPLEMENTING THIS CONFLICT OF INTEREST POLICY. D. WHETHER ANY IMPROVEMENTS SHOULD BE MADE TO THIS CONFLICT OF INTEREST POLICY. WHEN COMPLYING WITH THIS CONFLICT OF INTEREST POLICY, THE ORGANIZATION MAY, BUT NEED NOT, USE OUTSIDE ADVISORS. IF OUTSIDE EXPERTS ARE USED, THEIR USE SHALL NOT RELIEVE THE GOVERNING BOARD OF ITS RESPONSIBILITY UNDER THIS CONFLICT OF INTEREST POLICY. IF THE GOVERNING BOARD OR COMMITTEE DETERMINES THAT THERE IS A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL FOLLOW THE PROCEDURES OUTLINED BELOW: A) THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. B) AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. C) IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. TRANSACTION OR ARRANGEMENT. FORM 990, PART VI, SECTION B, LINE 15A COMPENSATION PROCESS FOR TOP OFFICIAL THE PROCESS INCLUDES THE FOLLOWING ELEMENTS: (1) ADVANCE APPROVAL BY THE INDEPENDENT BOARD OF DIRECTORS ("BOARD") OR THE INDEPENDENT COMPENSATION COMMITTEE OF THE ORGANIZATION; (2) USE OF APPROPRIATE COMPARABILITY DATA; AND (3) CONTEMPORANEOUS DOCUMENTATION. 1. ADVANCE REVIEW - THE BOARD OR COMPENSATION COMMITTEE SHALL REVIEW AND APPROVE COMPENSATION ARRANGEMENTS IN ADVANCE, PROVIDED THAT PERSONS WITH A CONFLICT OF INTEREST WITH RESPECT TO A GIVEN COMPENSATION ARRANGEMENT DO NOT PARTICIPATE IN THE REVIEW OR APPROVAL OF SUCH COMPENSATION ARRANGEMENT. 2. COMPARABILITY DATA - TO DETERMINE REASONABLE COMPENSATION, THE BOARD OR COMPENSATION COMMITTEE SHALL OBTAIN AND RELY ON APPROPRIATE COMPARABILITY DATA, INCLUDING, BUT NOT LIMITED TO: (I) COMPENSATION LEVELS PAID BY SIMILARLY SITUATED ORGANIZATIONS, BOTH TAXABLE AND TAX-EXEMPT, FOR FUNCTIONALLY COMPARABLE POSITIONS; (II) THE AVAILABILITY OF SIMILAR SERVICES IN THE GEOGRAPHIC AREA OF THE ORGANIZATION; (III) CURRENT COMPENSATION SURVEYS COMPILED BY THE INDEPENDENT FIRMS; AND (IV) ACTUAL WRITTEN OFFERS FROM SIMILAR ORGANIZATIONS COMPETING FOR THE SERVICES OF THE PERSON. 3. CONTEMPORANEOUS DOCUMENTATION - THE BOARD OR COMPENSATION COMMITTEE SHALL CONTEMPORANEOUSLY DOCUMENT THE BASIS FOR ITS COMPENSATION DETERMINATION, INCLUDING DOCUMENTATION: (I) THE AGREED-UPON TERMS AND DATE OF APPROVAL; (II) THE MEMBERS OF THE BOARD OR COMPENSATION COMMITTEE WHO: (A) WERE PRESENT DURING DEBATE ON THE COMPENSATION ARRANGEMENT AND (B)

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	VOTED ON THE COMPENSATION ARRANGEMENT; (III) THE COMPARABILITY DATA OBTAINED AND RELIED UPON AND HOW SUCH DATA WAS OBTAINED; AND (IV) ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE COMPENSATION ARRANGEMENT BY ANYONE WHO IS OTHERWISE A MEMBER OF THE BOARD OR COMPENSATION COMMITTEE BUT HAD A CONFLICT OF INTEREST WITH RESPECT TO SUCH COMPENSATION ARRANGEMENT. 4. THE MOST RECENT COMPENSATION REVIEW OCCURRED IN 2021.
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION PROCESS FOR OFFICERS SEE SCHEDULE O, FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL. THIS POLICY IS ALSO APPLICABLE TO THE ORGANIZATION'S TOP FINANCIAL OFFICER, THE CFO. THE MOST RECENT COMPENSATION REVIEW OCCURRED IN 2021.
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS DISCLOSURE EXPLANATION CHARITY: WATER'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FORM 990'S ARE AVAILABLE TO THE PUBLIC UPON REQUEST BY EMAILING INFO@CHARITYWATER.ORG. THE ORGANIZATION'S ANNUAL REPORTS, INDEPENDENT AUDIT REPORTS AND ANNUAL FINANCIAL STATEMENTS ARE AVAILABLE ONLINE AT CHARITYWATER.ORG/ABOUT/FINANCIALS
FORM 990, PART XI, LINE 9:	DISCOUNT ON GRANTS PAYABLE 1,374,278.

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SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

- Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
CHARITY GLOBAL INC

Employer identification number

22-3936753

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

Table with 6 columns: (a) Name, address, and EIN (if applicable) of disregarded entity; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Row 1 contains data for CHARITY GLOBAL (UK) LIMITED.

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

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Exempt Code section; (e) Public charity status (if section 501(c)(3)); (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? (Yes/No).

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproporionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

**a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity . . . . .

**b** Gift, grant, or capital contribution to related organization(s) . . . . .

**c** Gift, grant, or capital contribution from related organization(s) . . . . .

**d** Loans or loan guarantees to or for related organization(s) . . . . .

**e** Loans or loan guarantees by related organization(s) . . . . .

**f** Dividends from related organization(s) . . . . .

**g** Sale of assets to related organization(s) . . . . .

**h** Purchase of assets from related organization(s) . . . . .

**i** Exchange of assets with related organization(s) . . . . .

**j** Lease of facilities, equipment, or other assets to related organization(s) . . . . .

**k** Lease of facilities, equipment, or other assets from related organization(s) . . . . .

**l** Performance of services or membership or fundraising solicitations for related organization(s)

**m** Performance of services or membership or fundraising solicitations by related organization(s) . . . . .

**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .

**o** Sharing of paid employees with related organization(s) . . . . .

**p** Reimbursement paid to related organization(s) for expenses . . . . .

**q** Reimbursement paid by related organization(s) for expenses . . . . .

**r** Other transfer of cash or property to related organization(s) . . . . .

**s** Other transfer of cash or property from related organization(s) . . . . .

	Yes	No
<b>1a</b>		
<b>1b</b>		
<b>1c</b>		
<b>1d</b>		
<b>1e</b>		
<b>1f</b>		
<b>1g</b>		
<b>1h</b>		
<b>1i</b>		
<b>1j</b>		
<b>1k</b>		
<b>1l</b>		
<b>1m</b>		
<b>1n</b>		
<b>1o</b>		
<b>1p</b>		
<b>1q</b>		
<b>1r</b>		
<b>1s</b>		

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved



**Part VI** **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

**Part VII**   **Supplemental Information**

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

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Schedule R (Form 990) 2021

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