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 black lung benefit trust or private foundation)

OMB No. 1545-0047

➤ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

<u>A</u>	POT LI		nd ending					
В	Check if applicat	C Name of organization		D Employer identifi	ication number			
Σ	Addr	THE WATER PROJECT, INC.						
<u>_</u>	Nam- chan			26-1	455510			
L	Initia		Room/suite					
	Term ated Amer return	4 BICENTENNIAL SQUARE, THIRD FLOOR	3	- respirational	918-1804			
\vdash	Appli			G Gross receipts \$	1,032,966.			
_	tion pend	ng		H(a) Is this a group r	eturn			
		F Name and address of principal officer:R . PETER CHASSE		for affiliates?	Yes X No			
-		SAME AS ABOVE		H(b) Are all affiliates inc				
1.	Tax-ex	empt status: X 501(c)(3)	1) or 527		list. (see instructions)			
		te: ► HTTP://THEWATERPROJECT.ORG		H(c) Group exemption				
K	Form o	forganization: X Corporation Trust Association Other	L Year		A State of legal domicile: NC			
Pa	art I	Summary			a cate of legal definions, 14C			
0	1	Briefly describe the organization's mission or most significant activities: THE	WATER	PROJECT IN	C. IS			
ü		BRINGING RELIEF TO COMMUNITIES AROUND T	HE WORT	D WHO CHEER	D D			
rna	2	Check this box if the organization discontinued its operations or dis	and of more	WITO BUFFE	<u> </u>			
Ve	3							
Ö	4	Number of independent vising members of the governing body (Part VI, line 1a)		3	4			
<u>«</u>	5	Number of independent voting members of the governing body (Part VI, line 1t	9)	4	4			
itie	6	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	•••••••	5	2			
Activities & Governance		Total number of volunteers (estimate if necessary)		6	10			
Ac	/ a	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
	Ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
Revenue	20	- au a	_	Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		437,933.	1,022,720.			
	9	Program service revenue (Part VIII, line 2g)		0.	0.			
36	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		51.	292.			
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,888.	6,457.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	441,872.	1,029,469.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		191,676.	825,743.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	0)	0.	97,360.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	· · · · · · · · · · · · · · · · · · ·	13,447.	0.			
cbe	b	Total fundraising expenses (Part IX, column (D), line 25) 44,	571.					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		24,084.	78,588.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		229,207.	1,001,691.			
	19	Revenue less expenses. Subtract line 18 from line 12		212,665.	27,778.			
ces	1	The state of the s		ginning of Current Year				
Net Assets Fund Balanc	20	Total assets (Part X, line 16)	100	234,955.	End of Year 262,733.			
Ass	21	Total liabilities (Part X, line 26)		0.	204,733.			
Net	22	Net assets or fund balances. Subtract line 21 from line 20			262 722			
Pa	rt II	Signature Block		234,955.	262,733.			
2000		1	des and states					
true	correc	lties of perjury, I declare that I have examined this return, including accompanying schedu t, and complete. Declaration of preparer (other than officer) is based on all information of	iles and statem	ents, and to the best of my	y knowledge and belief, it is			
	001100	c und complete. Departer (orper drait officer) is based on an information of	which preparer	nas any knowledge.	-			
C:		Signature of officer The		Data	1/2011			
Sign				Date /				
Her	е	R. PETER CHASSE, PRESIDENT Type or print name and title						
_			1					
Daid		Print/Type preparer's name Preparer's signature	// '	ate Check	PTIN			
Paid		LEAH R MAYBRY	my !	1 9 1 self-employe	d			
75	arer	Firm's name ELLIOTT DAVIS, PILC	0	Firm's EIN ▶				
Use	Uniy	Firm's address 700 EAST MOREHEAD STREET, SUIT	E 400					
		CHARLOTTE, NC 28202		Phone no. 7	04-333-8881			
May	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No			

Total program service expenses ▶

Form 990 (2010) THE WATER PROJECT, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	Ì '		
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_ 5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
þ	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, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
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		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		ĺ	
	complete Schedule G, Part III	19		_X_
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	Ì	Ì	
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form 990 (2010) THE WATER PROJECT, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		•••	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ľ		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b		28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		1	
^^	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			77
	If "Yes," complete Schedule R, Part V, line 2	_36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			4 7
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	00	ا ب	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2010) THE WATER PROJECT, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	,.,					
			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?	1c		Х			
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 2a2						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
b	If "Yes," enter the name of the foreign country: ▶						
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	-					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			ĺ			
	any contributions that were not tax deductible?	6a		X			
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?						
7	Organizations that may receive deductible contributions under section 170(c).			х			
а	, , , , , , , , , , , , , , , , , , , ,						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		3,5			
	to file Form 8282?	7c		X			
d e	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>1</u>		X			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		X			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting						
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		ĺ			
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	9a					
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	i				
	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			Ė			
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders	=					
b	Gross income from other sources (Do not net amounts due or paid to other sources against			Ψ,			
	amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			ŀ			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ			
	Note. See the instructions for additional information the organization must report on Schedule O.		1				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		ĺ			
	organization is licensed to issue qualified health plans						
	Enter the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1				

Form 990 (2010) WATER PROJECT, INC. 26-1455510 Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question 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 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Does the organization have members or stockholders? 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year 8 by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ye<u>s</u> No 10a Does the organization have local chapters, branches, or affiliates? X b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 1<u>1a</u> X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done X 12c Does the organization have a written whistleblower policy? 13 X 13 Does the organization have a written document retention and destruction policy? X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a **b** If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Own website ___ Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

03301

SUITE

CONCORD,

R. PETER CHASSE - 704-918-1804

4 BICENTENNIAL SQUARE, THIRD FLOOR,

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

Check if Schedule O contains a response to any question 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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average	(C) Position		(D) Reportable	(E) Reportable	(F) Estimated				
Name and Title	hours per	(c	(check all that apply)		compensation	compensation	amount of			
	week (describe hours for related organizations in Schedule O)	ustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
R. PETER CHASSE										
PRESIDENT	50.00			X	X	X		70,000.	0.	13,268.
MICHAEL D. BALLOU	0 50	1		.				0		0
SECRETARY DODG	0.50	┝		X				0.	0.	0.
ROB HUDIBURG	0.50			x				0.	0.	0
TREASURER DAVID W. MYERS	0.50		-	4			-	0.		0.
CHAIRMAN	0.50			х				0.	0.	0.
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	1 990 (2010) THE WATE	R PROJE	CT_		IN	<u>c.</u>				26-145	<u>55</u>	10	Pag	ge 8
Pa	rt VII Section A. Officers, Directors, Tr		mpk	oyee			High	<u>iest</u>			-			
	(A) Name and title		(B) (C) Average Position						(D)	(E)	ŀ	_	F)	
	name and title	hours per	· ·					olγ)	Reportable compensation	Reportable compensation		Estin amou		
		week	<u> </u>			Г	r:-	Ť	from	from related			ner	•
		(describe	lirecto				_		the	organizations		compe		
		hours for related	66 01 (stee			usate		organization (W-2/1099-MISC)	(W-2/1099-MISC)		from		
		organizations	atrus	a i		oyee	d mos	ļ	(***271093*****150)			organi and re		
		in Schedule	individual trustee or director	Institutional trustee	Officer	у етр	Highest compensated employee	Former				organiz	zatio	ns
		O)	<u> </u>	Ĕ	5	\$	£ 5	ਣ						
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										~- u				
	Sub total	1			L	L	Ļ		70,000.	0		13,	26	0
	Sub-total Total from continuation sheets to Part V								70,000.	0		<u> 13,</u>		0.
	Total (add lines 1b and 1c)								70,000.	0		13,		
2	Total number of individuals (including but r							no re			<u> </u>			<u> </u>
	compensation from the organization													_ 0
											_	Υe	es I	No
3	Did the organization list any former officer,											- 1		
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	uch individual									.	3		X
7	and related organizations greater than \$15									•		4		X
5	Did any person listed on line 1a receive or a									dual for services	-	+		Δ
	rendered to the organization? If "Yes," com											5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated inc	lepe	nde	nt c	ontr	acto	rs tl	hat received more than	\$100,000 of compe	nsati	on fron	n	
	the organization. NONE							-		· · · · · · · · · · · · · · · · · · ·				
	(A) Name and business	address							(B) Description of s	ervices	Corr	(C) npensa	tion	
	* ************************************							+	<u> </u>					
								\perp						
	· · · · · · · · · · · · · · · · · · ·							-						
-								+						
2	Total number of independent contractors (in		ot lin	nited	i to	thos	e lis	ted	above) who received m	ore than		30 0		
	\$100,000 in compensation from the organiz	ation 🕨				0)							

Form 990 (2010) THE WATER PROJECT, INC. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must com			e columns (B), (C), and (D).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				,
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	825,743.	825,743.		
4	Benefits paid to or for members		F		
5	Compensation of current officers, directors,				
	trustees, and key employees	70,000.	35,000.	17,500.	17,500.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0 100		0 100	
7	Other salaries and wages	8,183.		8,183.	
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	12 260	6 634	2 217	2 21 17
9	Other employee benefits	13,268. 5,909.	6,634.	3,317.	3,317.
10	Payroll taxes	3,303.	2,645.	1,941.	1,323.
11	Fees for services (non-employees): Management				
		7,690.		7,690.	47-145 W
	LegalAccounting	5,492.		5,492.	
4	Lobbying			3,434.	
u	Professional fundraising services. See Part IV, line 17		A - 4 - 4 - 19 1000		
f	Investment management fees				**************************************
g g	Other	22,617.	21,767.	300.	550.
12	Advertising and promotion	733.	21/1010	300.	733.
13	Office expenses	10,261.	1,604.	2,603.	6,054.
14	Information technology		= /	270001	0,001.
15	Royalties		*		
16	Occupancy				
17	Travel	2,124.	2,124.		***************************************
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				
23	Insurance	1,597.		1,597.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)		,		
а	BANK FEES	9,752.		1,862.	7,890.
b	WEBSITE EXPENSES	7,733.	5,800.	-,552.	1,933.
c	PRINTING AND COPYING	5,271.	3,000		5,271.
-	FACILITIES AND EQUIPMEN	4,453.		4,453.	<u> </u>
	MISCELLANEOUS EXPENSES	865.		865.	***************************************
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,001,691.	901,317.	55,803.	44,571.
26	Joint costs. Check here ▶ if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form 990 (2010)
Part X Balance Sheet

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		173,081.	1	44,099.
	2	Savings and temporary cash investments		13,996.	2	173,278.
	3	Pledges and grants receivable, net	47,878.	3	39,703.	
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, directors,				
		employees, and highest compensated employees. Com	plete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defined				
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contributing			
		employers and sponsoring organizations of section 501				
(0		employees' beneficiary organizations (see instructions)		6		
Assets	7	Notes and loans receivable, net			7	17-7-21
As	8	Inventories for sale or use			8	1,353.
	9	Prepaid expenses and deferred charges		· · · · · · · · · · · · · · · · · · ·	9	
	10a					
		basis. Complete Part VI of Schedule D 10a	4,300.			
	b	Less: accumulated depreciation 10b		0.	10c	4,300.
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments · program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11	004 055	15	0.60	
	16	Total assets. Add lines 1 through 15 (must equal line 34		234,955.	16	262,733.
	17	Accounts payable and accrued expenses		17		
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	1
Liabilities	21	Escrow or custodial account liability. Complete Part IV o			21	
Ē	22	Payables to current and former officers, directors, truste highest compensated employees, and disqualified person	* * * 1			
Lia		- (O - to - do to 1	, i		20	
	23	Secured mortgages and notes payable to unrelated third			22	
	24	Unsecured notes and loans payable to unrelated third p		· · · · · · · · · · · · · · · · · · ·	24	
	25	Other liabilities. Complete Part X of Schedule D			25	-4
	26	Total liabilities. Add lines 17 through 25		0.		0.
		Organizations that follow SFAS 117, check here	X and complete			
ģ		lines 27 through 29, and lines 33 and 34.		=		
ဦ	27	Unrestricted net assets		55,031.	27	248,691.
aa	28	Temporarily restricted net assets		179,924.	28	14,042.
<u>8</u>	29	D A CLARA C			29	
Ë		Organizations that do not follow SFAS 117, check he				
ᇹ		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
\ss(31	Paid-in or capital surplus, or land, building, or equipment			31	
et/	32	Retained earnings, endowment, accumulated income, or			32	
Z	33	Total net assets or fund balances		234,955.	33	262,733.
	34	Total liabilities and net assets/fund balances		234,955.	34	262,733.
						Form 990 (2010)

Form **990** (2010)

	1990 (2010) THE WATER PROJECT, INC.	<u> 26-</u>	<u>1455510 </u>	Pag	ge 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,029	, 4	<u>69.</u>		
2	2 Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1	3	27	7,7	78.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.		
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	262	2,7	33.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			l		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			MJ		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a					
	separate basis, consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Aud	lit		į		
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b				

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Employer identification number Name of the organization THE WATER PROJECT, 26-1455510 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in ection 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c ____ Type III - Functionally integrated d ____ Type III - Other **b** Type II a Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the organization in col. (iii) Type of (v) Is the organization (v) Did you notify the (i) Name of supported (vii) Amount of (ii) EIN organization in col. (i) listed in your organization in col. organization (i) organized in the support (described on lines 1-9 (i) of your support? governing document? U.S.? above or IRC section (see instructions)) Yes Yes No Yes

Schedule A (Form 990 or 990-EZ) 2010 THE WATER PROJECT, INC. 26-1455510 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support		· · · · · · · · · · · · · · · · · · ·				
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")			83,943.	437,993.	1022720.	1544656.
2	Tax revenues levied for the organ-						· · · · · · · · · · · · · · · · · · ·
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to					:	
	the organization without charge						
4	Total. Add lines 1 through 3			83,943.	437,993.	1022720.	1544656.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included			·			
	on line 1 that exceeds 2% of the					3	
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						1544656.
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4			83,943.	437,993.	1022720.	1544656.
8	Gross income from interest,						
	dividends, payments received on	!					
	securities loans, rents, royalties						
	and income from similar sources				51.	292.	343.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain			}		İ	
	or loss from the sale of capital						
	assets (Explain in Part IV.)				3,888.		3,888.
11	Total support. Add lines 7 through 10			l			1548887.
	Gross receipts from related activities,	-				12	9,954.
13	First five years. If the Form 990 is for						
	organization, check this box and stor	here					▶X
	ction C. Computation of Publ				···		
	Public support percentage for 2010 (14	%
	Public support percentage from 2009					15	%
16a	33 1/3% support test - 2010. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2009. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a l	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u></u>

Schedule A (Form 990 or 990-EZ) 2010 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	elow, piease com	piete i art ii.)			·· · · · · · · · · · · · · · · · · ·	
	/-\ 0000	4.3.0007	(-) 0000	/ n 0000	() 0010	(0 T. I. I
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not						
, , , , ,						
include any "unusual grants.")					-	
2 Gross receipts from admissions, merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose				ļ		
3 Gross receipts from activities that						
are not an unrelated trade or bus-]				
iness under section 513					<u> </u>	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to				•	1	
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					j	
amount on line 13 for the year				<u>i </u>		
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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 in line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain					· 	
or loss from the sale of capital						
assets (Explain in Part IV.)			<u></u>			
13 Total support (Add lines 9, 10c, 11, and 12.)	the examination's	first second this	d formula on fittle to		501(-)(0)	-41
14 First five years. If the Form 990 is for				•		ation,
check this box and stop here Section C. Computation of Publi						PL
		-			Lan I	
15 Public support percentage for 2010 (ii					15	%
16 Public support percentage from 2009 Section D. Computation of Inves					16	%
			- 10 1 (2)		T T	
17 Investment income percentage for 20					17	%
18 Investment income percentage from 2					18	<u>%</u>
19a 33 1/3% support tests - 2010. If the						/ is not
more than 33 1/3%, check this box an				· · ·		
b 33 1/3% support tests - 2009. If the					•	
line 18 is not more than 33 1/3%, check						

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Name of the organization

Employer identification number

TI	HE WATER PROJECT, INC.	26-1455510							
Organization type(check	one):								
Filers of:	Section:								
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
· -	is covered by the General Rule or a Special Rule. 9(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ıle. See instructions.							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one							
Special Rules									
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.								
aggregate contribe	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contrutions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.								
contributions for u If this box is check purpose. Do not c	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.								
but it must answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule (Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line and requirements of Schedule B (Form 990, 990-EZ, or 990-PF).								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

SCHEDULE D

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

Employer identification number

Tr=-	THE WATER PROJECT,		26-1455510
Pa			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in \boldsymbol{v}	vriting that the assets held in donor advised f	
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose cont	
	impermissible private benefit?		
Pa	en e		V, line 7.
1	Purpose(s) of conservation easements held by the organization	——————————————————————————————————————	
	Preservation of land for public use (e.g., recreation or e	· - 1	
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		a Structural
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic stru		. 2c
d	Number of conservation easements included in (c) acquired a		
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the org	anization during the tax
	year	noment is legated	
4	Number of states where property subject to conservation eas Does the organization have a written policy regarding the per		•
5			Yes No
_	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,		
6	Amount of expenses incurred in monitoring, inspecting, and		
7	Does each conservation easement reported on line 2(d) abov		
8			F1
	and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation		
9	include, if applicable, the text of the footnote to the organization	•	
	conservation easements.	IOTS III ANCIAI STATEMENTS THAT GESCHOES THE	organization's accounting to
Pa	till Organizations Maintaining Collections of	Art. Historical Treasures, or Othe	r Similar Assets.
- ·	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art.
	historical treasures, or other similar assets held for public exh	•	
	the text of the footnote to its financial statements that descri		. , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (AS		balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, ec		
	relating to these items:	,	,,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
2	If the organization received or held works of art, historical trea		
-	the following amounts required to be reported under SFAS 1:		•
а	Revenues included in Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		> \$

		<u>ER PROJECT</u>						<u> 26-14</u>			
	t III Organizations Maintaining C										
3	Using the organization's acquisition, accession	on, and other record	ls, checl	k any of the	following that	are a signi	ificant	use of its	collection	items	3
	(check all that apply):										
а	Public exhibition	d			hange progra						
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 XIV.										
5											
,	to be sold to raise funds rather than to be ma								Yes		No
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or										
	reported an amount on Form 990, Par									<u>.</u> .	
1a	Is the organization an agent, trustee, custodi								7	_	1
	on Form 990, Part X?							L	Yes	L	No
b	If "Yes," explain the arrangement in Part XIV $$	and complete the fo	llowing	table:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year					•••••	1d	 			
е											
f	f Ending balance								_	···	
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					L	Yes		No
	b If "Yes," explain the arrangement in Part XIV.										
Par	t V Endowment Funds. Complete it	f the organization ar	swered	"Yes" to Fo	rm 990, Part	V, line 10.			r ··		
		(a) Current year	(b) F	rior year	(c) Two year	s back (d)	Three y	rears back	(e) Four	years	back
1a	Beginning of year balance	· · · · · · · · · · · · · · · · · · ·					··.···				
b	Contributions									,	
C	Net investment earnings, gains, and losses										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance		l <u>-</u>						<u>-</u>		
2	Provide the estimated percentage of the year	r end balance held a	as:								
а	Board designated or quasi-endowment		%								
b	Permanent endowment >	%									
C	Term endowment ▶	%									
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	red for the	organiz	zation	_		
	by:								,	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations	,							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sched	dule R?					3b	ŀ	
	Describe in Part XIV the intended uses of the										
Pai	t VI Land, Buildings, and Equipm	ent. See Form 99	0, Part X	, line 10.	<u> </u>						
	Description of investment	(a) Cost or o	other	(b) Cost	or other	(c) Accu	ımulate	ed	(d) Book	value)
		basis (investr	nent)	basis	(other)	depre	ciation				
1a	Land										
b	Buildings										
	Leasehold improvements	L									
d	Equipment				4,300.				4	1,30	00.

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

Schedule D (Form 990) 2010

4,300.

Sche	dule D (Form 990) 2010 THE WATER PROJECT, INC.		26-1	455510 Page 4				
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Sta	tements					
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		1,029,469.				
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		1,001,691.				
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		27,778.				
4	Net unrealized gains (losses) on investments	4						
5	Donated services and use of facilities	5	-					
6	Investment expenses	6						
7	Prior period adjustments	7						
8	Other (Describe in Part XIV.)	8						
9	Total adjustments (net). Add lines 4 through 8	9		0.				
10		10		27,778.				
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		Return	21,110.				
1				1,032,966.				
				1,032,300.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
	Net unrealized gains on investments 2a							
	Donated services and use of facilities 2b							
	Recoveries of prior year grants	407						
		,497		2 405				
е	Add lines 2a through 2d		-	3,497.				
3	Subtract line 2e from line 1		. 3	1,029,469.				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
	Investment expenses not included on Form 990, Part VIII, line 7b							
b	Other (Describe in Part XIV.)			_				
С	Add lines 4a and 4b			0.				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			1,029,469.				
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Exper							
1	Total expenses and losses per audited financial statements		1	1,005,188.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:							
а	Donated services and use of facilities							
b	Prior year adjustments 2b							
C	Other losses 2c							
d		,497	•					
е	Add lines 2a through 2d		2e	3,497.				
3	Subtract line 2e from line 1			1,001,691.				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			<u> </u>				
а	Investment expenses not included on Form 990, Part VIII, line 7b							
	Other (Describe in Part XIV.)							
	Add lines 4a and 4b		4c	0.				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			1,001,691.				
Part XIV Supplemental Information								
Complete this part to 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								
Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.								
x, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. PAGE 4, PART XII, LINE 2D - THE ADJUSTMENT RELATES TO COST OF GOODS SOLD								
1110	10 4, IAMI AII, DIND 2D IND ADOUDIMENT REDAILED TO C	.001	OI GO	ODD DODD				
THE 2	T WAS NETTED AGAINST THE REVENUE SHOWN ON THE FORM 9	an	HOWE	VER, IT				
1111	TI WAD NEITED AGAINDT THE NEVENOE DROWN ON THE FORM 3	50.	TIOME	VER, II				
WAS LISTED AS A SEPARATE EXPENSE ON THE AUDITED FINANCIAL STATEMENTS.								
MV	DISTED AS A SEPARATE EXPENSE ON THE AUDITED FINANCI	АП Э	TAIEM	ENIO.				
ממ	סת אמת המכ האפשת אות בנות בעות המנה א שי	ao am	OE G	0000 0010				
PAGE 4, PART XIII, LINE 2D - THE ADJUSTMENT RELATES TO COST OF GOODS SOLD								
THAT WAS NETTED ACAINST THE DESCENTE SUCINI ON THE BODM SOO HOMESTED IN								
THAT WAS NETTED AGAINST THE REVENUE SHOWN ON THE FORM 990. HOWEVER, IT								
WA.	LISTED AS A SEPARATE EXPENSE ON THE AUDITED FINANCI	AL S	ТАТЕМ	ENTS.				
								

SCHEDULE F (Form 990)

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. ➤ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

J						
THE WATER PROJE	ECT, INC.				26-145551	. 0
Part I General Info	rmation on A	ctivities Ou	tside the United States. Comp	lete if the orgar	nization answered "	Yes"
to Form 990, Pa	rt IV, line 14b.					
_	-		ds to substantiate the amount of the g	•		
grantees' eligibility for the	he grants or assi	stance, and the	selection criteria used to award the gr	ants or assistai	nce? X	Yes No
2 For grantmakers. Desc	cribe in Part V the	e organization's	procedures for monitoring the use of o	grant funds out	side the United Stat	es.
O Antivities non Denien (T	The following Doub					
3 Activities per Region. (T	(b) Number of	(c) Number of	an be duplicated if additional space is (d) Activities conducted in region	1	uitu liatad in (d)	(5 Total
(a) negion	offices	l employees.	(by type) (e.g., fundraising, program	1	vity listed in (d) gram service,	(f) Total expenditures
	in the region	agents, and independent contractors	services, investments, grants to	,	specific type	for and
		contractors in region	recipients located in the region)	of service	ce(s) in region	investments in region
		integion		WELLS APE E	RESTORED AND	
				1	ROUGHOUT THE	
	i					;
SIERRA LEONE	REGION, LATE O 0 PROGRAM SERVICES CONSTRUCTED					369,919,
					RESTORED AND	303,323.
					ROUGHOUT THE	
	1			REGION, LAT		•
KENYA	0	. 0	PROGRAM SERVICES	CONSTRUCTED		228,250.
				WELLS ARE R	ESTORED AND	
				REPAIRED TH	ROUGHOUT THE	
				REGION, LAT	RINES ARE	
UGANDA	0	0	PROGRAM SERVICES	CONSTRUCTED	AND THE	73,124.
	1		İ	WELLS ARE R	ESTORED AND	
				REPAIRED TH	ROUGHOUT THE	
				REGION AS A	RESPONSE TO	
HAITI	0	0	PROGRAM SERVICES	THE CRISIS	FOLLOWING THE	74,000.
]			WELLS ARE R	ESTORED AND	
	ļ	i		REPAIRED TH	ROUGHOUT THE	
				REGION, LAT	RINES ARE	
SUDAN		0	PROGRAM SERVICES	CONSTRUCTED	AND THE	52,500,
				WATER WELLS	ARE	
				INSTALLED I	N RURAL	
		_		COMMUNITIES		
INDIA	0	0_	PROGRAM SERVICES	TRICHY REGI	ON.	27,950.
						
				ļ		
3 a Sub-total	0	0				925 743
b Total from continuation			12:			825,743.
sheets to Part I	o	0			ř	0.
c Totals (add lines 3a						

825 743.

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any THE WATER PROJECT, INC. Schedule F (Form 990) 2010

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Part II can be duplicated if additional space is needed.

PartII

Page 2

26-1455510

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)
		KAKAMEGA, KENYA	TO INSTALL AND REPAIR WATER WELLS AS WELL AS CARRY OUT HYGIENE TRAINING IN RURAL	209,600	209, 600, WIRE TRANSFER	0		HS CO
							-	
2 Enter total number of the IRS, or for which t	recipient organization the grantee or counse	Enter total number of recipient organizations listed above that are rethe IRS, or for which the grantee or counsel has provided a section	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	foreign country,	recognized as tax-ex	empt by		

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2010

3 Enter total number of other organizations or entities

THE WATER PROJECT, INC.

Page 3

(h) Method of valuation (book, FMV, appraisal, other)

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. 26-1455510 Schedule F (Form 990) 2010

Part III can be duplicated if additional space is needed.

(g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

Foreign Partnerships. (see Instructions for Form 8865)

for Form 5713) Yes X No

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2010

6

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: THE WATER PROJECT, INC. WORKS DIRECTLY WITH

ITS PROJECT IMPLEMENTERS TO MEASURE AND EVALUATE THE EFFECTIVENESS OF

PREVIOUSLY FUNDED AND INSTALLED WATER PROJECTS. THROUGH THIS PROCESS,

THE WATER PROJECT, INC. THEN, IN COLLABORATION WITH THOSE PARTNERS,

REFINES PROGRAM APPROACHES SO THEY MEET OR EXCEED ESTABLISHED BEST

PRACTICES AS WELL AS ITS OWN CRITERIA FOR LONG TERM PROGRAM

EFFECTIVENESS. THIS PROCESS MAY INCLUDE SITE VISITS, EXTERNAL AND

INDEPENDENT AUDITS OF PARTNER ACTIVITIES, REGULAR MEETINGS WITH VARIOUS

STAKEHOLDERS, AND RESEARCH.

PART I, LINE 3, COLUMN (E):

REGION: SIERRA LEONE

(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.

REGION: KENYA

(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.

REGION: UGANDA

(E) SPECIFIC TYPES OF SERVICES IN REGION: WELLS ARE RESTORED AND
REPAIRED THROUGHOUT THE REGION, LATRINES ARE CONSTRUCTED, AND THE WATER
IS MADE SANITARY.

REGION: HAITI

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

QMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization

THE WATER PROJECT, INC.

Employer identification number 26-1455510

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: NEEDLESSLY FROM A LACK OF ACCESS TO CLEAN WATER AND PROPER SANITATION. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THROUGH A PARTNERSHIP WITH BUSOGA TRUST AMERICA, THE WATER PROJECT, INC. IS INSTALLING WATER WELLS IN RURAL COMMUNITIES AND AT SCHOOLS IN THE MASINDI REGION OF UGANDA. IN ADDITION TO THE INSTALLATION OF HARDWARE, THE TEAMS CARRY OUT HYGIENE TRAINING WITHIN THE SCHOOLS AND COMMUNITIES THROUGH UNIQUE DRAMA PRESENTATIONS AND FORMAL TRAINING THE WATER PROJECT, INC. FUNDED 12 WELL PROJECTS IN 2010. IN ADDITION, THE WATER PROJECT, INC. PURCHASED AND DELIVERED 15 BIOSAND FILTERS FOR A WATER FILTRATION PILOT PROJECT. EXPENSES \$ 73,124. INCLUDING GRANTS OF \$ 73,124. REVENUE S 0. THROUGH A PARTNERSHIP WITH WATER HARVEST INTERNATIONAL, THE WATER PROJECT, INC. IS INSTALLING WATER WELLS IN RURAL COMMUNITIES, CHURCHES, AND SCHOOLS IN SOUTHERN SUDAN. IN ADDITION TO THE INSTALLATION OF HARDWARE, THE TEAMS CARRY OUT BASIC HYGIENE TRAINING WITHIN THE SCHOOLS AND COMMUNITIES. THE WATER PROJECT, INC. FUNDED 24 PROJECTS IN 2010. EXPENSES \$ 52,500. INCLUDING GRANTS OF \$ 52,500. REVENUE \$ 0. THROUGH A PARTERSHIP WITH WELLS FOR LIFE, THE WATER PROJECT, INC. IS INSTALLING WATER WELLS IN RURAL COMMUNITIES IN THE TRICHY AREA OF THE WATER PROJECT, INC. FUNDED 15 PROJECTS IN 2010. EXPENSES \$ 27,950. INCLUDING GRANTS OF \$ 27,950. REVENUE S 0.

Schedule O (Form 990 or 990-EZ) (2010)

COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS BASED UPON SALARY

SURVEYS AND OTHER RESEARCH MATERIALS. THE PROCESS AND DELIBERATION ARE

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization THE WATER PROJECT, INC.	Employer identification number 26-1455510
NOTED IN THE BOARD MINUTES.	
110220 211 2112 201110 2101	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MD, MA, MI, MS, NJ	NM, NY, NC, OK, OR, PA
RI,SC,TN,UT,VA,WA,WV	
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCU	MENTS, CONFLICT
OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE ALL MADE	E AVAILABLE TO THE
PUBLIC AT THE WATER PROJECT, INC OFFICES OR BY REQUEST.	
	,
	· · · · · · · · · · · · · · · · · · ·